

### MEDICAL ASSISTANCE ADMINISTRATION



# Prosthetic and Orthotic Devices

**Billing Instructions** 

Chapter 388-543 WAC

### **About this publication**

This publication supersedes all previous MAA <u>Prosthetic and Orthotic Devices Billing Instructions.</u>

Published by the Medical Assistance Administration Washington State Department of Social and Health Services

Note: The effective date and publication date for any particular page of this document may be found at the bottom of the page.

# Received too many billing instructions? Too few?

Address incorrect?

Please detach, fill out, and return the card located inside the back cover of this billing instruction. The information you provide will be used to update our records and provider information.

## **Table of Contents**

-	Contacts	
Section A:	About the Program What is the purpose of the Prosthetic and Orthotic Devices program? Notifying Clients of Their Rights (Advance Directives)	
Section B:	Client Eligibility	
	Who is eligible for P&O Devices?	
	Are clients enrolled in Primary Care Case Manager/Management (PCCM) eligible for P&O devices?	
Section C:	Coverage	
	What is covered?	
	What are the general conditions of coverage?	
	restrictions or limitations?	
	list in this billing instruction?	
	What is not covered?	
Section D.	Prosthetic and Orthotic Devices Coverage Table  Provider Requirements	C.3
Section D.	What is required from MAA's P&O devices providers?	D 1
	Who does MAA reimburse for providing P&O devices and related	D.1
	supplies and services to MAA clients?	D.1
	What records must be kept?	
Section E:	Authorization	
	What is prior authorization?	
	Is prior authorization required?	
	General Policies for Prior Authorization	
	What is expedited prior authorization?	
	EPA Criteria Coding List	E.4 E.5

### **Table of Contents (Cont.)**

Section F:	Reimbursement	
	General Reimbursement for P&O Devices and Related Supplies	
	and Services	F.1
	Specific Reimbursement for P&O Devices	
	Purchased P&O Devices and Related Supplies	
<b>Section G:</b>	Coverage Table (See Appendix for Fee Schedule)	
	Policy and coverage	G.1
Section H:	Billing	
	What is the time limit for billing?	H.1
	What fee should I bill MAA for eligible clients?	H.2
	How do I bill for services provided to Primary Care Case	
	Management (PCCM) clients?	H.2
	How do I bill for clients who are eligible for both Medicare and Medicaid?	
	Third-Party Liability	
Section I:	How to Complete the HCFA-1500 Claim Form	
	General Guidelines	I.1
	Sample HCFA-1500 Claim Form	
Section J:	Common Questions Regarding Medicare Part B/	
	Medicaid Crossover Claims	J.1
	How to Complete the Medicare Part B/Medicaid Crossover	
	HCFA-1500 Claim Form	
	General Guidelines.	J.3
	Sample HCFA-1500 Medicare Part B/Medicaid Claim Form	
Annandiy _	Fee Schedule	nn 1

## **Important Contacts**

A provider may use MAA's toll-free lines for questions regarding its programs; however, MAA's response is based solely on the information provided to the [MAA] representative at the time of the call or inquiry, and in no way exempts a provider from following the rules and regulations that govern MAA's programs. [WAC 388-502-0020(2)].

# Where do I call for information on becoming a DSHS provider, submitting a change of address or ownership, or to ask questions about the status of a provider application?

**Provider Enrollment Unit** (866) 545-0544

#### Where do I send my claims?

#### **Hard Copy Claims:**

Division of Program Support PO Box 9247 Olympia WA 98507-9247

#### **Magnetic Tapes/Floppy Disks:**

Division of Program Support Claims Control PO Box 45560 Olympia, WA 98504-5560

### How do I request prior authorization?

### All authorization issues, questions or comments should be addressed to:

#### Write/Call:

Division of Health Services Quality Support Quality Utilization Section Durable Medical Equipment PO Box 45506 Olympia, WA 98504-5506 (800) 292-8064 (360) 586-5299 fax

#### **How do I request a Limitation Extension?**

#### Write/Call:

Division of Health Services Quality Support Quality Utilization Section Durable Medical Equipment PO Box 45506 Olympia, WA 98504-5506 (800) 292-8064 (360) 586-5299 fax

### Where do I address reimbursement issues, questions, or comments?

DME - Program Manager Professional Rates Section Division of Operational Support Services PO Box 45510 Olympia, WA 98504-5510

### Where do I call if I have questions regarding electronic billing?

#### Write/call:

Electronic Billing Unit PO Box 45512 Olympia, WA 98504-5512 (360) 725-1267

### **Important Contacts (cont.)**

### <u>How do I obtain copies of billing</u> instructions or numbered memoranda?

#### Check out our web site at:

http://maa.dshs.wa.gov

#### Or write/call:

Provider Relations Unit PO Box 45562 Olympia WA 98504-5562 (800) 562-6188

### Who do I contact if I have questions regarding...

<u>Payments, denials, general questions</u> <u>regarding claims processing, or Healthy</u> <u>Options?</u>

**Provider Relations Unit** (800) 562-6188

### Private insurance or third party liability, other than Healthy Options?

**Coordination of Benefits Section** (800) 562-6136

### **Definitions**

This section defines terms and acronyms used in these billing instructions.

**Artificial limb** – See prosthetic device. [WAC 388-543-1000]

By Report (BR) – A method of reimbursement for covered items, procedures, and services for which the department has no set maximum allowable fees. [WAC 388-543-1000]

**Client -** An applicant for, or recipient of, DSHS medical care program.

Code of Federal Regulations (CFR) - A codification of the general and permanent rules published in the federal register by the executive departments and agencies of the federal government.

Community Services Office (CSO) - An office of the department that administers social and health services at the community level. [WAC 388-500-0005]

Core Provider Agreement - The basic contract that MAA holds with providers serving MAA clients. The provider agreement outlines and defines terms of participation in Medical Assistance.

**Date of Delivery** – The date the client actually took physical possession of an item or equipment. [WAC 388-543-1000]

**Department** - The state Department of Social and Health Services [DSHS]. [WAC 388-500-0005]

Expedited Prior Authorization – The process for obtaining authorization for selected durable medical equipment, and related supplies, prosthetics, orthotics, medical supplies and related services, in which providers use a set of numeric codes to indicate to MAA which acceptable indications/conditions/MAA-defined criteria are applicable to a particular request for DME authorization. [WAC 388-543-1000]

**Explanation of Benefits (EOB)** - A coded message on the Medical Assistance Remittance Advice and Status Report (RA) that gives detailed information about the claim associated with that report.

**Explanation of Medicare Benefits (EOMB)** – A federal report generated for Medicare providers displaying transaction information regarding Medicare claims processing and payments.

Fee-for-Service – The general payment method MAA uses to reimburse for covered medical services provided to clients, except those services covered under MAA's prepaid managed care programs.

[WAC 388-543-1000]

Health Care Financing Administration Common Procedure Coding System (HCPCS) – A coding system established by the Health Care Financing Administration to define services and procedures. [WAC 388-543-1000] Internal Control Number (ICN) - A 17-digit number that appears on your Remittance Advice and Status Report (RA) by the client's name. Each claim is assigned an ICN when it is received by MAA. The number identifies that claim throughout the claim's history.

Limitation Extension – A process for requesting and approving covered services and reimbursement that exceeds a coverage limitation (quantity, frequency, or duration) set in WAC, billing instructions, or numbered memoranda. Limitation extensions require prior authorization. [WAC 388-543-1000]

Managed Care - A prepaid comprehensive system of medical and health care delivery including preventive, primary, specialty, and ancillary health services.
[WAC 388-538-050]

**Maximum Allowable** - The maximum dollar amount for which a provider may be reimbursed by MAA for specific services, supplies, or equipment.

**Medicaid -** The state and federally funded aid program that covers the Categorically Needy (CNP) and Medically Needy (MNP) programs.

Medical Assistance Administration (MAA) - The administration within DSHS authorized by the secretary to administer the acute care portion of the Title XIX Medicaid, Title XXI Children's Health Insurance Program (CHIP), and the statefunded medical care programs, with the exception of certain non-medical services for persons with chronic disabilities.

Medical Identification card(s) – Medical Identification cards are the forms DSHS uses to identify clients of medical programs. These cards are good only for the dates printed on them. Clients will receive a Medical Identification card in the mail each month they are eligible. These cards are also known as DSHS Medical ID cards and were formerly called medical coupons or MAID cards.

### **Medical Management, Division of (DMM)**

- A division within the Medical Assistance Administration responsible for the administration of the quality improvement and assurance programs, utilization review and management, and prior authorization for fee-for-service program.

Medically Necessary - A term for describing [a] requested service which is reasonably calculated to prevent, diagnose, correct, cure, alleviate or prevent worsening of conditions in the client that endanger life, or cause suffering or pain, or result in an illness or infirmity, or threaten to cause or aggravate a handicap, or cause physical deformity or malfunction. There is no other equally effective, more conservative or substantially less costly course of treatment available or suitable for the client requesting the service. For the purpose of this section, "course of treatment" may include mere observation or, where appropriate, no treatment at all. [WAC 388-500-0005]

**Medicare** - The federal government health insurance program for certain aged or disabled clients under Titles II and XVIII of the Social Security Act. Medicare has two parts:

- "Part A" covers the Medicare inpatient hospital, post-hospital skilled nursing facility care, home health services, and hospice care.
- "Part B" is the supplementary medical insurance benefit (SMIB) covering the Medicare doctor's services, outpatient hospital care, outpatient physical therapy and speech pathology services, home health care, and other health services and supplies not covered under Part A of Medicare. [WAC 388-500-0005]

**Orthotic Device or Orthotic** – A corrective or supportive device that:

- Prevents or corrects physical deformity or malfunction; or
- Supports a weak or deformed portion of the body. [WAC 388-543-1000]

**Patient Identification Code (PIC)** - An alphanumeric code that is assigned to each MAA client consisting of:

- First and middle initials (a dash (-) must be entered if the middle initial is not indicated).
- Six-digit birthdate, consisting of numerals only (MMDDYY).
- First five letters of the last name (and spaces if the name is fewer than five letters).
- Alpha or numeric character (tiebreaker).

Prior Authorization – A process by which clients or providers must request and receive MAA approval for certain medical equipment and related supplies, prosthetics, orthotics, medical supplies and related services, based on medical necessity, before the services are provided to clients, as a precondition for provider reimbursement. Expedited prior authorization and limitation extension are types of prior authorization. Also see WAC 388-501-0165.

[WAC 388-543-1000]

**Program Support, Division of (DPS)** – The division within MAA responsible for providing administrative services for the following:

- Claims Processing;
- Family Planning Services;
- Administrative Match Services to Schools and Health Departments;
- Managed Care Contracts; and
- Provider Enrollment/Relations

**Prosthetic device or prosthetic** – A replacement, corrective, or supportive device prescribed by a physician or other licensed practitioner of the healing arts, within the scope of his or her practice as defined by state law, to:

- Artificially replace a missing portion of the body;
- Prevent or correct physical deformity or malfunction; or
- Support a weak or deformed portion of the body. [WAC 388-543-1000]

**Provider or Provider of Service -** An institution, agency, or person:

- Who has a signed agreement [Core Provider] with the department to furnish medical care, goods, and/or services to clients; and
- Is eligible to receive payment from the department. [WAC 388-500-0005]

Remittance Advice and Status Report (Referred to as "RAs")- A report produced by the Medicaid Management Information System (MMIS) that provides detailed information concerning submitted claims and other financial transactions.

**Resource Based Relative Value Scale** (**RBRVS**) – A scale that measures the relative value of a medical service or intervention, based on amount of physician resources involved. [WAC 388-543-1000]

**Revised Code Of Washington (RCW) -** Washington State laws.

**Third Party** - Any entity that is or may be liable to pay all or part of the medical cost of care of a federal Medicaid or state medical program client.

Usual and Customary Charge – The amount the provider typically charges to 50% or more of his or her non-Medicaid clients, including clients with other third-party coverage. [WAC 388-543-1000]

Washington Administrative Code (WAC) - Codified rules of the State of Washington.

### **About the Program**

# What is the purpose of the Prosthetic and Orthotic Devices program? (Refer to WAC 388-543-1100)

The Medical Assistance Administration's (MAA) Prosthetic and Orthotic (P&O) Devices program makes the purchase of medically necessary P&O devices accessible to eligible MAA clients when the P&O devices are not included in other reimbursement methodologies (e.g., inpatient hospital DRG, nursing facility daily rate, HMO, or managed health care programs). The federal government deems P&O devices as optional services under the Medicaid program, except when:

- Prescribed as an integral part of an approved plan of treatment under the Home Health program; or
- Required under the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program.

## Notifying Clients of Their Rights (Advance Directives) (42 CFR, Subpart I)

All Medicare-Medicaid certified hospitals, nursing facilities, home health agencies, personal care service agencies, hospices, and managed health care organizations are federally mandated to give <u>all adult clients</u> written information about their right, under state law, to make their own health care decisions.

Clients have the right to:

- Accept or refuse medical treatment;
- Make decisions concerning their own medical care; and
- Formulate an advance directive, such as a living will or durable power of attorney, for their health care.

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**Medical Program** 

Medicare Beneficiaries – These clients are

dual eligible (Medicare/Medicaid)

# **Client Eligibility**

### Who is eligible for P&O Devices? (Refer to Chapter 388-529 WAC)

Clients presenting Medical Identification cards with the following identifiers\* <u>are eligible</u> for P&O devices:

**Medical Program Identifier** 

#### **CNP** Categorically Needy Program – These clients are dual eligible (Medicare/Medicaid) **CNP** Categorically Needy Program - Children's Children's Health Health **CNP** Categorically Needy Program - Children's Health Insurance Program **CHIP GA-U** General Assistance - Unemployable No Out of State Care **LCP** Limited Casualty Program-Medically Needy **MNP** Program **MNP** Medically Needy Program-Qualified



**QMB** 

**Note:** To clarify, clients presenting Medical ID cards with the following identifiers are not eligible for P&O devices:

- ✓ **QMB-Medicare Only** (Qualified Medicare Beneficiary-Medicare Only) (See *Billing* section)
- ✓ MIP-EMER Hospital Only No out-of-state care (Medically Indigent Program-EMER Hospital Only No out-of-state care)

# Are clients enrolled in Healthy Options managed care eligible for P&O devices? (Refer to WAC 388-538-060 and 095)

YES! Clients with an identifier in the HMO column on their Medical Identification card are enrolled in one of MAA's Healthy Options managed care plans. All services must be requested directly through the client's Primary Care Provider (PCP). Clients can contact their PCP by calling the telephone number located on their Medical Identification card.

All medical services covered under a managed health care plan must be obtained by the client through designated facilities or providers. The managed care plan is responsible for:

- Payment of covered services; and
- Payment of services referred by a provider participating with the plan to an outside provider.

To prevent billing denials, please check the client's Medical Identification card <u>prior</u> to scheduling services and at the <u>time of service</u> to make sure proper authorization or referral is obtained from the PCP and/or plan.

MAA does not cover P&O devices provided by a nonparticipating provider for a client who is enrolled in a MAA-contracted managed care plan. (Refer to WAC 388-543-1400 [9])

### Are clients enrolled in Primary Care Case Manager/Management (PCCM) eligible for P&O devices?

**Yes!** For the client who has chosen to obtain care with a PCCM, the identifier in the HMO column will be "PCCM." These clients must obtain or be referred for services via the PCCM. The PCCM is responsible for coordination of care just like the PCP would be in a plan setting. Please refer to the client's Medical Identification card for the PCCM. (See the *Billing* section for further information.)



**Note:** To prevent billing denials, please check the client's Medical Identification card <u>prior</u> to scheduling services and at the <u>time of the service</u> to make sure proper authorization or referral is obtain from the PCCM.

## Coverage

### What is covered? (Refer to WAC 388-543-1100)

- The Medical Assistance Administration (MAA) covers the P&O devices, repairs, and labor charges listed in the *Fee Schedule* (section H) of this billing instruction.
- MAA covers a replacement prosthesis only when the purchase of a replacement prosthesis is less costly than repairing or modifying a client's current prosthesis.
   (WAC 388-543-2600[3])



**Note:** Those HCPCS codes with a "#" symbol in the maximum allowable column of the fee schedule are not covered by MAA.

### What are the general conditions of coverage?

(Refer to WAC 388-543-1100)

MAA covers the P&O devices listed in the *Fee Schedule* (section H) of this billing instruction when all of the following apply. The P&O devices must be:

- Medically necessary (see *Definitions* section). The provider or client must submit sufficient objective evidence to establish medical necessity. Information used to establish medical necessity includes, but is not limited to, the following:
  - ✓ A physiological description of the client's disease, injury, impairment, or other ailment, and any changes in the client's condition written by the prescribing physician, licensed prosthetist and/or orthotist, physical therapist, occupational therapist, or speech therapist; or
  - ✓ Video and/or photograph(s) of the client demonstrating the impairments and the client's ability to use the requested equipment, when applicable.
- Within the scope of an eligible client's medical care program (see *Client Eligibility* section);
- Within accepted medical or physical medicine community standards of practice;
- Prior authorized (see *Authorization* section);

- Prescribed by a physician or other licensed practitioner of the healing arts and within the scope of his or her practice as defined by state law. The prescription must state the specific item or service requested, diagnosis, prognosis, estimated length of need (weeks or months, not to exceed six months before being reevaluated), and quantity; and
- All written prior authorization requests must include a copy of the prescription upon submittal.
- Billed to the department as the payer of last resort only. MAA does not pay first and then collect from Medicare.

(8)

**Note:** MAA evaluates By Report (BR) items, procedures, or services for medical appropriateness and reimbursement value on a case-by-case basis.

# What if a service is covered but considered experimental or has restrictions or limitations? (Refer to WAC 388-543-1100 [3] and [4])

- MAA evaluates a request for a service that is in a covered category, but has been determined to be experimental or investigational as defined by WAC 388-531-0050, under the provisions of WAC 388-501-0165 which relate to medical necessity.
- MAA evaluates a request for a covered service that is subject to limitations or other restrictions and approves such a service beyond those limitations or restrictions when medically necessary, under the standards for covered services in WAC 388-501-0165 (see page F.3 for limitation extensions).

# How can I request that equipment/supplies be added to the "covered" list in this billing instruction? (WAC 388-543-1100 [7])

An interested party may request MAA to include new P&O devices and related supplies and services in these billing instructions by sending a written request to MAA's Quality Utilization Section (see *Important Contacts* section), plus all of the following:

- Manufacturer's literature;
- Manufacturer's pricing;
- Clinical research/case studies (including FDA approval, if required); and
- Any additional information the requestor feels is important.

### What is not covered? (Refer to WAC 388-543-1300)

MAA pays only for P&O devices and related supplies and services that are medically necessary, listed as covered, meet the definition of prosthetics and orthotics (see *Definitions* section), and prescribed per the provider requirements in this billing instruction (see *Provider Requirements* section).

MAA considers all requests for covered P&O devices and related supplies and services, and noncovered P&O devices and related supplies and services, under the provisions of WAC 388-501-0165 which relate to medical necessity. When MAA considers that a request does not meet the requirements for medical necessity, the definition(s) of covered item(s), or is not covered, the client may appeal that decision under the provisions of WAC 388-501-0165.

MAA specifically excludes services and equipment in this billing instruction from fee-for-service (FFS) scope of coverage when the services and equipment do not meet the definition for a covered item, or the services are not typically medically necessary. This exclusion does not apply if the services and equipment are:

- Required under the EPSDT program;
- Included as part of a managed care plan service package;
- Included in a waivered program; or
- Part of one of the Medicare programs for qualified Medicare beneficiaries.

### Services and equipment that are not covered include, but are not limited to:

- Services, procedures, devices, or the application of associated services that the Food and Drug Administration (FDA) and/or the Centers for Medicare and Medicaid Services (CMS) (formerly known as Health Care Financing Administration [HCFA]) consider investigative or experimental on the date the services are provided;
- Any service specifically excluded by statute;
- More costly services or equipment when MAA determines that less costly, equally effective services or equipment are available;
- Hairpieces or wigs;
- Material or services covered under manufacturer's warranties;
- Procedures, prosthetics, or supplies related to gender dysphoria surgery;
- Shoe lifts less than one inch, arch supports, and nonorthopedic shoes;
- Supplies and equipment used during a physician office visit, such as tongue depressors and surgical gloves;

- Prosthetic devices dispensed for cosmetic reasons;
- Personal and comfort items that do not meet the definition of a prosthetic or orthotic device (see *Definitions* section), including, but not limited to, the following:
  - Clothing and accessories, such as coats, gloves (including wheelchair gloves), hats, scarves, slippers, and socks;
  - ✓ Cosmetics, including corrective formulations, hair depilatories, and products for skin bleaching, commercial sun screens, and tanning; and
  - ✓ Impotence devices;



**Note:** MAA evaluates a request for any equipment or devices that are listed as noncovered in this billing instruction under the provisions of WAC 388-501-0165. (Refer to WAC 388-543-1100[2])

# Prosthetic and Orthotic Devices Coverage Table

**Note:** In the **PA** column:

Y = requires Prior Authorization

 $Y^*$  = requires Prior Authorization for clients 20 years of age or older

In the **Lic** (Licenses) column:

Y = licensure required

 $Y^{**}$  = licensure required if prescribing treatment of scoliosis

\*\*\* = the item can be provided by a DME or Pharmacy provider as long as other licensure requirements have been met

Procedure				Policy/
Code	PA	Lic	Description	Comments
A4280			Adhesive skin support attachment for use with external breast prosthesis, each	
A5500			For diabetics only, fitting (including follow-up) custom preparation and supply of off-the-shelf depth-inlay shoe manufactured to accommodate multi-density insert(s), per shoe	
A5501			For diabetics only, fitting (including follow-up) custom preparation and supply of shoe molded from cast(s) of patient's foot (custom molded shoe), per shoe	
A5503			For diabetics only, modification (including fitting) of off- the-shelf depth-inlay shoe or custom molded shoe with roller or rigid rocker bottom, per shoe	
A5504			For diabetics only, modification (including fitting) of off- the-shelf depth-inlay shoe or custom molded shoe with wedges, per shoe	
A5505			For diabetics only, modification (including fitting) of off- the-shelf depth-inlay shoe or custom molded shoe with metatarsal bar, per shoe	
A5506			For diabetics only, modification (including fitting) of off- the-shelf depth-inlay shoe or custom molded shoe with off- set heel(s), per shoe	
A5507	Y		For diabetics only, not otherwise specified modification (including fitting) of off-the-shelf depth-inlay or custom molded shoe, per shoe	
A5508			For diabetics only, deluxe feature of off-the-shelf depth- inlay shoe or custom molded shoe, per shoe	
A5510			For diabetics only, direct formed, compression molded to patient's foot without external heat source, multiple density insert(s) prefabricated, per shoe	

			Trostine	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
A5512			For diabetics only, multiple density insert, direct	
			formed, molded to foot after external heat source of	
			230 degrees fahrenheit or higher, total contact with	
			patient's foot, including arch, base layer minimum of	
			1/4 inch material of shore a 35 durometer or 3/16 inch	
			material of shore a 40 durometer (or higher),	
			prefabricated, each	
A5513			For diabetics only, multiple density insert, custom	
			molded from model of patient's foot, total contact with	
			patient's foot, including arch, base layer minimum of	
			3/16 inch material of shore a 35 durometer or higher,	
			includes arch filler and other shaping material, custom	
			fabricated, each	
E1800			Dynamic adjustable elbow extension/flexion device,	
<b>T</b> 105:			includes soft interface material	
E1801			Bi-directional static progressive stretch elbow device	
F14005			with range of motion adjustment, includes cuffs	
E1802			Dynamic adjustable forearm pronation/supination	
71007			device, includes soft interface material	
E1805			Dynamic adjustable wrist extension/flexion device,	
			includes soft interface material	
E1806			Bi-directional static progressive stretch wrist device	
			with range of motion adjustment, includes cuffs	
E1810			Dynamic adjustable knee extension/flexion device,	
71011			includes soft interface material	
E1811			Bi-directional progressive stretch knee device with	
F1015			range of motion adjustment, includes cuffs	
E1815			Dynamic adjustable ankle extension/flexion, includes	
F1016			soft interface material	
E1816			Bi-directional progressive stretch ankle device with	
F1010			range of motion adjustment, includes cuffs	
E1818			Bi-directional progressive stretch forearm	
			pronation/supination device with range of motion	
E1820			adjustment, includes cuffs  Replacement soft interface material, dynamic	
E1820			adjustable extension/flexion device	
E1931			Replacement soft interface material/cuffs for bi-	
E1821			directional static progressive stretch device	
E1825			Dynamic adjustable finger extension/flexion device,	
11043			includes soft interface material	
E1830			Dynamic adjustable toe extension/flexion device,	
E1030			includes soft interface material	
E1840			Dynamic adjustable shoulder	
L1040			flexion/abduction/rotation device, includes soft	
			interface material	
L0100	Y	Y	Cranial orthosis (helmet), with or without soft	
20100	1	1	interface, molded to patient model	
L0110		***	Cranial orthosis (helmet), with or without soft	
20110			interface, non-molded	
L0112	Y	Y	Cranial cervical orthosis, congenital torticollis type,	
20112		•	with or without soft interface material, adjustable	
			range of motion joint, custom fabricated	
1		i .	٠ ٠٠٠٠٠٠٠	

			rrostile	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L0120		***	Cervical, flexible, nonadjustable (foam collar)	
L0130		Y	Cervical, flexible, thermoplastic collar, molded to	
			patient	
L0140		***	Cervical, semi-rigid, adjustable (plastic collar)	
L0150		***	Cervical, semi-rigid, adjustable molded chin cup	
			(plastic collar with mandibular/occipital piece)	
L0160			Cervical, semi-rigid, wire frame occipital/mandibular	
			support	
L0170	Y	Y	Cervical, collar, molded to patient model	
L0172		***	Cervical, collar, semi-rigid thermoplastic foam, two	
			piece	
L0174		***	Cervical, collar, semi-rigid, thermoplastic foam, two	
			piece with thoracic extension	
L0180			Cervical, multiple post collar, occipital/mandibular	
			supports, adjustable	
L0190			Cervical, multiple post collar, occipital/mandibular	
			supports, adjustable cervical bars (Somi, Guilford,	
			Taylor types)	
L0200			Cervical, multiple post collar, occipital/mandibular	
			supports, adjustable cervical bars, and thoracic	
			extension	
L0210		***	Thoracic, rib belt	
L0220		***	Thoracic, rib belt, custom fabricated	
L0430	Y	Y**	Spinal orthosis, anterior-posterior-lateral control, with	
			interface material, custom fitted (dewall posture	
			protector only)	
L0450		Y**	TLSO, flexible, provides trunk support, upper thoracic	
			region, produces intracavitary pressure to reduce load	
			on the intevertebral disks with rigid stays or panel(s),	
			includes shoulder straps and closures, prefabricated,	
			includes fitting and adjustment	
L0452	Y		TLSO, flexible, provides trunk support, upper thoracic	
			region, produces intracavitary pressure to reduce load	
			on the intevertebral disks with rigid stays or panel(s),	
			includes shoulder straps and closures, custom	
			fabricated	
L0454		Y**	TLSO, flexible, provides trunk support, extends from	
			sacrococcygeal junction to above T-9 vertebra,	
			restricts gross truck motion in the sagittal plane,	
			produces intracavitary pressure to reduce load on the	
			intervertebral disks with rigid stays or panel(s),	
			includes shoulder straps and closures, prefabricated,	
10456		Y**	includes fitting and adjustment	
L0456		I ""	TLSO, flexible, provides trunk support, thoracic	
			region, rigid posterior panel and soft anterior apron, extends from the sacrococcygeal junction and	
			terminates just inferior to the scapular spine, restricts	
			gross truck motion in the sagittal plane, produces	
			intracavitary pressure to reduce load on the	
			intervertebral disks, includes straps and closures,	
			prefabricated, includes fitting and adjustment	
			F und addition	

			Prostne	etic and Orthotic Devices
<b>Procedure</b>				Policy/
Code	PA	Lic	Description	Comments
			1	
L0458		Y	TLSO, triplanar control, modular segmented spinal	
L0436		1	system, two rigid plastic shells, posterior extends from	
			the sacrococcygeal junction and terminates just	
			inferior to the scapular spine, anterior extends from the	
			symphysis pubis to the xiphold, soft liner, restricts	
			gross trunk motion in the sagittal, coronal, and	
			tranverse planes, lateral strength is provided by	
			overlapping plastic and stabilizing closures, includes	
			straps and closures, prefabricated, including fitting and	
			adjustment	
L0460		Y	TLSO, triplanar control, modular segmented spinal	
L0400		1	system, two rigid plastic shells, posterior extends from	
			the sacrococcygeal junction and terminates just	
			inferior to the scapular spine, anterior extends from the	
			symphysis pubis to the sternal notch, soft liner,	
			restricts gross trunk motion in the sagittal, coronal, and	
			tranverse planes, lateral strength is provided by	
			overlapping plastic and stabilizing closures, includes	
			straps and closures, prefabricated, including fitting and	
			adjustment	
L0462		Y	TLSO, triplanar control, modular segmented spinal	
			system, three rigid plastic shells, posterior extends	
			from the sacrococcygeal junction and terminates just	
			inferior to the scapular spine, anterior extends from the	
			symphysis pubis to the sternal notch, soft liner,	
			restricts gross trunk motion in the sagittal, coronal, and	
			transverse planes, lateral strength is provided by	
			overlapping plastic and stabilizing closures, includes	
			straps and closures, prefabricated, including fitting and	
			adjustment	
L0464		Y	TLSO, triplanar control, modular segmented spinal	
			system, four rigid plastic shells, posterior extends from	
			the sacrococcygeal junction and terminates just	
			inferior to scapular spine, anterior extends from	
			symphysis pubis to the sternal notch, soft liner,	
			restricts gross trunk motion in sagittal, coronal, and	
			tranverse planes, lateral strength is provided by	
			overlapping plastic and stabilizing closures, includes	
			straps and closures, prefabricated, includes fitting and	
			adjustment	
L0466		Y	TLSO, sagittal-coronal control, rigid posterior frame	
			and flexible soft anterior apron with straps, closures	
			and padding, restricts gross trunk motion in sagittal	
			plane, produces intracavitary pressure to reduce load	
			on intervertebral disks, includes fitting and shaping the	
			frame, prefabricated, includes fitting and adjustment	

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Procedure				Policy/
Code	PA	Lic	Description	Comments
L0468		Y**	TLSO, sagittal control, rigid posterior frame and	
20100		•	flexible soft anterior apron with straps, closures and	
			padding, extends from sacroccoccygeal junction over	
			scapulae, lateral strength provided by pelvic, thoracic	
			and lateral frame pieces, restricts gross trunk motion in	
			sagittal, and coronal planes, produces intracavitary	
			pressure to reduce load on intervertebral disks,	
			includes fitting and shaping the frame, prefabricated,	
			includes filling and adjustment	
L0470		Y**		
L0470		1	TLSO, triplanar-control, rigid posterior frame and	
			flexible soft anterior apron with straps, closures and	
			padding, extends from sacrococcygeal junction to	
			scapula, lateral strength provided by pelvic, thoracic,	
			and lateral frame pieces, rotational strength provided	
			by subclavicular extentions, restricts gross trunk	
			motion in sagittal, coronal, and tranverse planes,	
			produces intracavitary pressure to reduce the load on	
			intervertebral disks, includes fitting and shaping the	
T 0 152		W Falsala	frame, prefabricated, includes fitting and adjustment	
L0472		Y**	TLSO, triplanar control, hyperextension, rigid anterior	
			and lateral frame extends from symphysis pubis to	
			sternal notch with two anterior components (one pubic	
			and one sternal), posterior and lateral pads with straps	
			and closures, limits spinal flexion, restricts gross trunk	
			motion in sagittal, coronal, and transverse planes,	
			includes fitting and shaping the frame, prefabricated,	
			includes fitting and adjustment	
L0474	Y	Y**	TLSO, sagittal-coronal control, flexion compression	
			jacket, two rigid plastic shells with soft liner, posterior	
			extends from sacrococcygeal junction and terminates	
			at or before the T-9 vertebra, anterior extends from	
			symphysis pubis to xiphoid, usually laced together on	
			one side, restricts gross trunk motion in sagittal and	
			coronal planes, allows free flexion and compression of	
			the LS region, includes straps and closures,	
			prefabricated, includes fitting and adjustment	
L0480	Y	Y	TLSO, triplanar control, one piece rigid plastic shell	
			without interface liner, with multiple straps and	
			closures, posterior extends from sacrococcygeal	
			junction and terminates just inferior to scapular spine,	
			anterior extends from symphysis pubis to sternal	
			notch, anterior or posterior opening, restricts gross	
			trunk motion in sagittal, coronal, and transverse	
			planes, includes a carved plaster or CAD-CAM model,	
			custom fabricated	

			TTOSUIC	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L0482	Y	Y	TLSO, triplanar control, one piece rigid plastic shell	
20102	_	1	with interface liner, with multiple straps and closures,	
			posterior extends from sacrococcygeal junction and	
			terminates just inferior to scapular spine, anterior	
			extends from symphysis pubis to sternal notch,	
			anterior or posterior opening, restricts gross trunk	
			motion in sagittal, coronal, and transverse planes,	
			includes a carved plaster or CAD-CAM model, custom	
			fabricated	
L0484	Y	Y	TLSO, triplanar control, two piece rigid plastic shell	
			without interface liner, with multiple straps and	
			closures, posterior extends from sacrococcygeal	
			junction and terminates just inferior to scapular spine,	
			anterior extends from symphysis pubis to sternal	
			notch, lateral strength is enhanced by overlapping	
			plastic, restricts gross trunk motion in sagittal, coronal,	
			and transverse planes, includes a carved plaster or	
			CAD-CAM model, custom fabricated	
L0486	Y	Y	TLSO, triplanar control, two piece rigid plastic shell	
			with interface liner, with multiple straps and closures,	
			posterior extends from sacrococcygeal junction and	
			terminates just inferior to scapular spine, anterior	
			extends from symphysis pubis to sternal notch, lateral	
			strength is enhanced by overlapping plastic, restricts	
			gross trunk motion in sagittal, coronal, and transverse	
			planes, includes a carved plaster or CAD-CAM model,	
			custom fabricated	
L0490		Y**	TLSO, sagittal-coronal control, one piece rigid plastic	
			shell with overlapping reinforced anterior, with	
			multiple straps and closures, posterior extends from	
			sacrococcygeal junction and terminates at or before the	
			T-9 vertebra, anterior extends from symphysis pubis to	
			xiphoid, anterior opening, restricts gross trunk motion	
			in sagittal and coronal planes, prefabricated, includes	
T 0 40 1		**	fitting and adjustment	
L0491		Y	TLSO, Sagittal-coronal control, modular segmented	
			spinal system, two rigid plastic shells, posterior	
1.0402		37	extends from the sacrococcygeal junction area	
L0492		Y	TLSO, Sagittal-coronal control, modular segmented	
			spinal system, three rigid plastic shells, posterior	
1.0621		Y**	extends from the sacrococcygeal junction Sacroiliac orthosis, flexible, provides pelvic-sacral	
L0621		1	1	
1			support, reduces motion about the sacroiliac joint, includes straps, closures, may include pendulous	
1			abdomen design, prefabricated, includes fitting and	
			adjustment	
L0622		Y**	Sacroiliac orthosis, flexible, provides pelvic-sacral	
L0022		***	support, reduces motion about the sacroiliac joint,	
			includes straps, closures, may included pendulous	
			abdomen design, custom fabricated	
		<u> </u>	abdomen design, custom fabricated	

			11051110	ene and Orthode Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
			•	
L0623	Y	Y**	Sacroiliac orthosis, provides pelvic-sacral support,	
L0023	1	***		
		4-4-4-	with rigid or semi-rigid panels over the sacrum and	
			abdomen, reduces motion about the sacroiliac joint,	
			includes straps, closures, may include pendulous	
			abdomen design, prefabricated, includes fitting and	
			adjustment	
L0624	Y	Y**	Sacroiliac orthosis, provides pelvic-sacral support,	
			with rigid or semi-rigid panels over the sacrum and	
			abdomen, reduces motion about the sacroiliac joint,	
			includes straps, closures, may include pendulous	
			abdomen design, custom fabricated	
L0625		Y**	Lumbar orthosis, flexible, provides lumbar support,	
		***	posterior extends from L-1 to below L - 5 vertebra,	
			produces intracavitary pressure to reduce load on the	
			intervertebral discs, includes straps, closures, may	
			include pendulous abdomen design, shoulder straps,	
			stays, prefabricated, includes fitting and adjustment	
L0626		Y**	Lumbar orthosis, sagittal control, with rigid posterior	
L0020		***		
		4-4-4-	panel(s), posterior extends from L-1 to below L-5	
			vertebra, produces intracavitary pressure to reduce	
			load on the intervertebral discs, includes straps,	
			closures, may include padding, stays, shoulder straps,	
			pendulous abdomen design, prefabricated, includes	
			fitting and adjustment	
L0627		Y	Lumbar orthosis, sagittal control, with rigid anterior	
		**/***	and posterior panels, posterior extends from L-1 to	
			below L-5 vertebra, produces intractivitary pressure to	
			reduce load on the intervertebral discs, includes straps,	
			closures, may include padding, shoulder straps,	
			pendulous abdomen design, prefabricated, includes	
			fitting and adjustment	
L0628		Y**/***	Lumbar-sacral orthosis, flexible, provides lumbo-	
		- ,	sacral support, posterior extends from sacrococcygeal	
			junction to T-9 vertebra, produces intracavitary	
			pressure to reduce load on the intervertebral discs,	
			includes straps, closures, may include stays, shoulder	
			straps, pendulous abdomen design, prefabricated,	
			includes fitting and adjustment	
1.0620	V	V		
L0629	Y	Y **/***	Lumbar-sacral orthosis, flexible, provides lumbo-	
		**/***	sacral support, posterior extends from sacrococcygeal	
			junction to T-9 vertebra, produces intracavitary	
			pressure to reduce load on the intervertebral discs,	
			includes straps, closures, may include stays, shoulder	
			straps, pendulous abdomen design, custom fabricated	
L0630		Y	Lumbar-sacral orthosis, sagittal control, with rigid	
		**/***	posterior panel(s), posterior extends from	
			sacrococcygeal junction to T-9 vertebra, produces	
			intracavitary pressure to reduce load on the	
			intervertebral discs, includes straps, closures, may	
			include padding, stays, shoulder straps, pendulous	
			abdomen design, prefabricated, includes fitting and	
			adjustment	
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Prosthetic and Orthotic Device					
<b>Procedure</b>				Policy/	
Code	PA	Lic	Description	Comments	
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L0631		Y**	Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, pendulous abdomen design, prefabricated, includes fitting and adjustment		
L0632	Y	Y	Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, custom fabricated		
L0633		Y**/***			
L0634	Y	Y	Lumbar-sacral orthosis, sagittal-coronal control, with rigid posterior frame/Panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, custom fabricated		
L0635	Y	Y	Lumbar-sacral orthosis, sagittal-coronal control, lumbar flexion, rigid posterior frame/panels, lateral articulating design to flex the lumbar spine, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, anterior panel, pendulous abdomen design, prefabricated, includes fitting and adjustment		
L0636	Y	Y	Lumbar-sacral orthosis, sagittal-coronal control, lumbar flexion, rigid posterior frame/panels, lateral articulating design to flex the lumbar spine, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, anterior panel, pendulous abdomen design, custom fabricated		

				etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L0637	Y	Y**	Lumbar-sacral orthosis, sagittal-coronal control, with	
			rigid anterior and posterior frame/panels, posterior	
			extends from sacrococcygeal junction to T-9 vertebra,	
			lateral strength provided by rigid lateral frame/panels,	
			produces intracavitary pressure to reduce load on	
			intervertebral discs, includes straps, closures, may	
			include padding, shoulder straps, pendulous abdomen	
			design, prefabricated, includes fitting and adjustment	
L0638	Y	Y	Lumbar-sacral orthosis, sagittal-coronal control, with	
			rigid anterior and posterior frame/panels, posterior	
			extends from sacrococcygeal junction to T-9 vertebra,	
			lateral strength provided by rigid lateral frame/panels,	
			produces intracavitary pressure to reduce load on	
			intervertebral discs, includes straps, closures, may	
			include padding, shoulder straps, pendulous abdomen	
			design, custom fabricated	
L0639		Y**	Lumbar-sacral orthosis, sagittal-control, rigid	
			shell(s)/panel(s) posterior extends from	
			sacrococcygeal junction to T-9 vertebra, anterior	
			extends from symphysis pubis to xiphoid, produces	
			intracavitary pressure to reduce load on the	
			intervertebral discs, overall strength is provided by	
			overlapping rigid material and stabilizing closures,	
			includes straps, closures, may include soft interface,	
			pendulous abdomen design, prefabricated, includes	
			fitting and adjustment	
L0640	Y	Y**	Lumbar-sacral orthosis, sagittal-control, rigid	
			shell(s)/panel(s) posterior extends from	
			sacrococcygeal junction to T-9 vertebra, anterior	
			extends from symphysis pubis to xiphoid, produces	
			intracavitary pressure to reduce load on the	
			intervertebral discs, overall strength is provided by	
			overlapping rigid material and stabilizing closures,	
			includes straps, closures, may include soft interface,	
			pendulous abdomen design, custom fabricated	
L0700	Y	Y	CTLSO, anterior-posterior-lateral control, molded to	
			patient model (Minerva type)	
L0710	Y	Y	CTLSO, anterior-posterior-lateral control, molded to	
			patient model, with interface material, (Minerva type)	
L0810		Y	Halo procedure, cervical halo incorporated into jacket	
			vest	
L0820		Y	Halo procedure, cervical halo incorporated into plaster	
			body jacket	
L0830	Y	Y	Halo procedure, cervical halo incorporated into	
			Milwaukee type othosis	
L0859		Y	Addition to halo procedures, magnetic resonance	
			image compatible system	
L0861	Y	Y	Addition to halo procedure, replacement liner/interface	
			material	
L0960		Y**	Torso support, postsurgical support, pads for	
20700		***	postsurgical support	
L0970		Y**	TLSO, corset front	
Lorio		***	1250, corsect from	
	l .			

	Prosthetic and Orthotic Devices					
Procedure				Policy/		
Code	PA	Lic	Description	Comments		
			-			
L0972		Y**	LSO, corset front			
L0974		Y**	TLSO, full corset			
L0976		Y	LSO, full corset			
		**/***				
L0978		***	Axillary crutch extension			
L0980		***	Peroneal straps, pair			
L0982		***	Stocking supporter grips, set of four (4)			
L0984	Y	***	Protective body sock, each			
L0999	Y		Addition to spinal orthosis, not otherwise specified			
L1000	Y*	Y	CTLSO (Milwaukee), inclusive of furnishing initial			
			orthosis, including model			
L1005	Y	Y	Tension based scoliosis orthosis and accessory pads,			
			includes fitting and adjustment			
L1010		Y	Addition to CTLSO or scoliosis orthosis, axilla sling			
L1020		Y	Addition to CTLSO or scoliosis orthosis, kyphosis pad			
L1025		Y	Addition to CTLSO or scoliosis orthosis, kyphosis			
			pad, floating			
L1030		Y	Addition to CTLSO or scoliosis orthosis, lumbar			
			bolster pad			
L1040		Y	Addition to CTLSO or scoliosis orthosis, lumbar or			
			lumbar rib pad			
L1050		Y	Addition to CTLSO or scoliosis orthosis, sternal pad			
L1060		Y	Addition to CTLSO or scoliosis orthosis, thoracic pad			
L1070		Y	Addition to CTLSO or scoliosis orthosis, trapezius			
			sling			
L1080		Y	Addition to CTLSO or scoliosis orthosis, outrigger			
L1085		Y	Addition to CTLSO or scoliosis orthosis, outrigger,			
T 1000		**	bilateral with vertical extensions			
L1090		Y	Addition to CTLSO or scoliosis orthosis, lumbar sling			
L1100		Y	Addition to CTLSO or scoliosis orthosis, ring flange,			
T 1110	17.₩	N/	plastic or leather			
L1110	Y*	Y	Addition to CTLSO or scoliosis orthosis, ring flange, plastic or leather, molded to patient model			
L1120	Y*	Y	Addition to CTLSO or scoliosis orthosis, cover for			
L1120	1 '	1	upright, each			
L1200	Y*	Y	TLSO, inclusive of furnishing initial orthosis only			
L1210		Y	Addition to TLSO, (low profile), lateral thoracic			
21210		1	extension			
L1220		Y	Addition to TLSO, (low profile), anterior thoracic			
			extension			
L1230		Y	Addition to TLSO, (low profile), Milwaukee type			
			superstructure			
L1240		Y	Addition to TLSO, (low profile), lumbar derotation			
			pad			
L1250		Y	Addition to TLSO, (low profile), anterior ASIS pad			
L1260		Y	Addition to TLSO, (low profile), anterior thoracic			
			derotation pad			
L1270		Y	Addition to TLSO, (low profile), abdominal pad			
L1280		Y	Addition to TLSO, (low profile), rib gusset (elastic),			
			each			

Li   Pa				1 TOSTIL	etic and Orthotic Devices
L1290 Y Addition to TLSO, (low profile), lateral trochanteric pad L1300 Y* Other scoliosis procedure, body jacket molded to patient model L1310 Y* Y Other scoliosis procedures, postoperative body jacket L1499 Y Y Spinal orthosis, not otherwise specified L1500 Y THKAO, mobility frame (Newington, Parapodium types)  L1510 THKAO, standing frame; with or without tray accessories THKAO, swivel walker L1600 HO, abduction control of hip joints, flexible, Frejka type, with cover, prefabricated, includes fitting and adjustment HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment Adduction control of hip joints, static, adjustable (Von Rosen type), prefabricated, includes fitting and adjustment HO, abduction control of hip joints, static, adjustable, (Illfed type), prefabricated, includes fitting and adjustment HO, abduction control of hip joints, static, adjustable, (Illfed type), prefabricated, includes fitting and adjustment Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment Audit size, prefabricated, includes fitting and adjustment Hip orthosis providing adduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, high cuffs (Rancho hip action type), custom fabricated  L1680 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment control, prefabricated, includes fitting and adjustment control, prefabricated, includes fitting	Procedure				Policy/
L1300 Y* Y Other scoliosis procedure, body jacket molded to patient model  L1310 Y* Y Other scoliosis procedure, postoperative body jacket  L1499 Y Y Spinal orthosis, not otherwise specified  L1500 Y THKAO, mobility frame (Newington, Parapodium types)  L1510 THKAO, swivel walker  L1510 THKAO, swivel walker  L1600 HO, abduction control of hip joints, flexible, Frejha type, with cover, prefabricated, includes fitting and adjustment  L1610 HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  L1620 HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630 Y HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1640 Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, postoperative hip abduction type, custom fabricated  L1680 Y HO, abduction control of hip joint, postoperative hip abd	Code	PA	Lic	Description	Comments
L1300 Y* Y Other scoliosis procedure, body jacket molded to patient model  L1310 Y* Y Other scoliosis procedure, postoperative body jacket  L1499 Y Y Spinal orthosis, not otherwise specified  L1500 Y THKAO, mobility frame (Newington, Parapodium types)  L1510 THKAO, swivel walker  L1510 THKAO, swivel walker  L1600 HO, abduction control of hip joints, flexible, Frejha type, with cover, prefabricated, includes fitting and adjustment  L1610 HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  L1620 HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630 Y HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1640 Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, postoperative hip abduction type, custom fabricated  L1680 Y HO, abduction control of hip joint, postoperative hip abd					
L1300 Y* Y Other scoliosis procedure, body jacket molded to patient model  L1310 Y* Y Other scoliosis procedure, postoperative body jacket  L1499 Y Y Spinal orthosis, not otherwise specified  L1500 Y THKAO, mobility frame (Newington, Parapodium types)  L1510 THKAO, swivel walker  L1510 THKAO, swivel walker  L1600 HO, abduction control of hip joints, flexible, Frejha type, with cover, prefabricated, includes fitting and adjustment  L1610 HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  L1620 HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630 Y HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1640 Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1650 HO, abduction control of hip joints, static, plaviable, (Ilfled type), prefabricated, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plaviable, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, postoperative hip abduction type, custom fabricated  L1680 Y HO, abduction control of hip joint, postoperative hip abd	L1290		Y	Addition to TLSO, (low profile), lateral trochanteric	
L.1300				· • • • • • • • • • • • • • • • • • • •	
Datient model   Li   Li   Li   Li   Li   Li   Li   L	L1300	Y*	Y		
L1310		_			
L1499 Y Y Spinal orthosis, not otherwise specified   L1500 Y THKAO, mobility frame (Newington, Parapodium types)   L1510	L1310	Y*	Y	Other scoliosis procedures, postoperative body jacket	
L1500 Y THKAO, mobility frame (Newington, Parapodium types)  L1510 THKAO, standing frame; with or without tray accessories THKAO, swivel walker  L1520 Y THKAO, swivel walker  L1600 HO, abduction control of hip joints, flexible, Frejka type, with cover, prefabricated, includes fitting and adjustment  L1610 HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  L1620 HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630 Y HO, abduction control of hip joints, semi-flexible (Von Rosen type), prefabricated, includes fitting and adjustment  L1640 Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, adjustable, (Iffled type), prefabricated, includes fitting and adjustment  L1652 Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment  L1660 HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment, any type  L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated					
L1510 THKAO, standing frame; with or without tray accessories  L1520 Y THKAO, swivel walker  L1600 HO, abduction control of hip joints, flexible, Frejka type, with cover, prefabricated, includes fitting and adjustment  L1610 HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  L1620 HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630 Y HO, abduction control of hip joints, semi-flexible (Von Rosen type), prefabricated, includes fitting and adjustment  L1640 Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, adjustable, (Iffled type), prefabricated, includes fitting and adjustment  L1652 Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment  L1660 HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment, any type  L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip abduction type, custom fabricated  L1680 Y HO, abduction control of hip joints, postoperative hip abduction type, refabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
L1510 THKAO, standing frame; with or without tray accessories  L1520 Y THKAO, swivel walker  L1600 HO, abduction control of hip joints, flexible, Frejka type, with cover, prefabricated, includes fitting and adjustment  L1610 HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  L1620 HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630 Y HO, abduction control of hip joints, semi-flexible (Von Rosen type), prefabricated, includes fitting and adjustment  L1640 Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated dajustment  L1650 HO, abduction control of hip joints, static, adjustable, (Iffled type), prefabricated, includes fitting and adjustment  L1652 Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment and prefabricated, includes fitting and adjustment and prefabricated, includes fitting and adjustment.  L1680 Y HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment and prefabricated, includes fitting and adjustment.  L1680 Y HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment how adjustment hip abduction type, custom fabricated.  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated.  L1700 Y Y Legg Perthes orthosis (Nowington type), custom fabricated.  L1710 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
L1520 Y THKAO, swivel walker  L1600 HO, abduction control of hip joints, flexible, Frejka type, with cover, prefabricated, includes fitting and adjustment  L1610 HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  L1620 HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630 Y HO, abduction control of hip joints, semi-flexible (Von Rosen type), prefabricated, includes fitting and adjustment  L1640 Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650 HO, abduction control of hip joints, static, adjustable, (Illfled type), prefabricated, includes fitting and adjustment  L1652 Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment, any type  L1660 HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1690 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated	L1510				Limit of one per client every 5
L1600				· ·	_
L1600	L1520	Y		THKAO, swivel walker	
type, with cover, prefabricated, includes fitting and adjustment  HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630  Y HO, abduction control of hip joints, semi-flexible (Von Rosen type), prefabricated, includes fitting and adjustment  L1640  Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650  HO, abduction control of hip joints, static, adjustable, (Ilfled type), prefabricated, includes fitting and adjustment  L1652  Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment  L1660  HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1680  Y HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1685  Y HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1686  Y HO, abduction control of hip joints, postoperative hip abduction type, custom fabricated  L1686  Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690  Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700  Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710  Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720  Y Legg Perthes orthosis, trilateral (Tachdijan type),					
L1610  L1620  L1620  HO, abduction control of hip joints, flexible, (Frejka cover only), prefabricated, includes fitting and adjustment  L1620  HO, abduction control of hip joints, flexible, (Pavlik Harness), prefabricated, includes fitting and adjustment  L1630  Y HO, abduction control of hip joints, semi-flexible (Von Rosen type), prefabricated, includes fitting and adjustment  L1640  Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated  L1650  HO, abduction control of hip joints, static, adjustable, (Ilfled type), prefabricated, includes fitting and adjustment  L1652  Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment any type  L1660  HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment, any type  L1680  Y HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1680  Y HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1685  Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686  Y HO, abduction control of hip joint, postoperative hip abduction type, refabricated, includes fitting and adjustment  L1690  Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700  Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710  Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720  Y Legg Perthes orthosis, trilateral (Tachdijan type),					
L1620					
L1620	L1610				
L1620				cover only), prefabricated, includes fitting and	
Harness), prefabricated, includes fitting and adjustment				adjustment	
Harness), prefabricated, includes fitting and adjustment	L1620			HO, abduction control of hip joints, flexible, (Pavlik	
L1630					
CVon Rosen type), prefabricated, includes fitting and adjustment				adjustment	
L1640 Y HO, abduction control of hip joints, static, pelvic band or spreader bar, thigh cuffs, custom fabricated L1650 HO, abduction control of hip joints, static, adjustable, (Ilfled type), prefabricated, includes fitting and adjustment L1652 Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment, any type L1660 HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated L1720 Y Legg Perthes orthosis, trilateral (Tachdijan type),	L1630		Y	HO, abduction control of hip joints, semi-flexible	
L1640				(Von Rosen type), prefabricated, includes fitting and	
L1650 HO, abduction control of hip joints, static, adjustable, (Ilfled type), prefabricated, includes fitting and adjustment  L1652 Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment, any type  L1660 HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
L1650	L1640		Y		
Cliffed type), prefabricated, includes fitting and adjustment					
L1652 Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment, any type  L1660 HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	L1650				
L1652					
abductor spreader bar, adult size, prefabricated, includes fitting and adjustment, any type  L1660 HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
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L1660  HO, abduction control of hip joints, static, plastic, prefabricated, includes fitting and adjustment  L1680  Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685  Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686  Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690  Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700  Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710  Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720  Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
L1680 Y HO, abduction control of hip joints, dynamic, pelvic control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	L1660				
control, adjustable hip motion control, thigh cuffs (Rancho hip action type), custom fabricated  L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	7.1.100				
Cancho hip action type), custom fabricated	L1680		Y		
L1685 Y HO, abduction control of hip joint, postoperative hip abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
abduction type, custom fabricated  L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	I 1607		3.7		
L1686 Y HO, abduction control of hip joint, postoperative hip abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	L1685		Y		
abduction type, prefabricated, includes fitting and adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	I 1606		3.7		
adjustment  L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	L1686		Y		
L1690 Y Y Combination, bilateral, lumbo-sacral, hip, femur orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
orthosis providing adduction and internal rotation control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	I 1600	V	V		
control, prefabricated, includes fitting and adjustment  L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	L1090	ĭ	ĭ		
L1700 Y Y Legg Perthes orthosis (Toronto type), custom fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),					
fabricated  L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	I 1700	V	v		
L1710 Y Y Legg Perthes orthosis (Newington type), custom fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	L1/00	1	1		
fabricated  L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	I 1710	V	v		
L1720 Y Y Legg Perthes orthosis, trilateral (Tachdijan type),	L1/10	1	1		
1 1 20 1 1 1 1	I 1720	V	v		
	11/20	1	1		

			Trostite	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L1730		Y	Legg Perthes orthosis (Scottish Rite type), custom	
21730		-	fabricated	
L1755	Y	Y	Legg Perthes orthosis (Patten bottom type), custom	
21733	-	-	fabricated	
L1800		***	KO, elastic with stays, prefabricated, includes fitting	
21000			and adjustment	
L1810		***	KO, elastic with joints, prefabricated, includes fitting	
21010			and adjustment	
L1815		***	KO, elastic or other elastic type material with condylar	
21015			pad(s), prefabricated, includes fitting and adjustment	
L1820		***	KO, elastic with condylar pads and joints,	
21020			prefabricated, includes fitting and adjustment	
L1825		***	KO, elastic knee cap, prefabricated, includes fitting	
21020			and adjustment	
L1830		***	KO, Immobilizer, canvas longitudinal, prefabricated,	
			includes fitting and adjustment	
L1831			Knee orthosis, locking knee joint(s), positional	
			orthosis, prefabricated, includes fitting and adjustment	
L1832			KO, adjustable knee joints (Unicentric or polycentric),	
			positional orthosis, rigid support, prefabricated,	
			includes fitting and adjustment	
L1834	Y	Y	KO, without knee joints, rigid, custom fabricated	
L1836			Knee orthosis, rigid, without joint(s), includes soft	
			interface material, prefabricated, includes fitting and	
			adjustment	
L1840		Y	KO, derotation, medial-lateral, anterior cruciate	
			ligament, custom fabricated	
L1843			KO, single upright, thigh and calf, with adjustable	
			flexion and extension joint (Unicentric or polycentric),	
			medial-lateral and rotation control, prefabricated,	
			includes fitting and adjustment	
L1844	Y		KO, single upright, thigh and calf, with adjustable	
			flexion and extension joint (Unicentric or polycentric),	
			medial-lateral and rotation control, custom fabricated	
L1845			KO, double upright, thigh and calf, with adjustable	
			flexion and extension joint (Unicentric or polycentric),	
			medial-lateral and rotation control, prefabricated,	
V 4015	**		includes fitting and adjustment	
L1846	Y		KO, double upright, thigh and calf, with adjustable	
			flexion and extension joint (Unicentric or polycentric),	
I 1047			medial-lateral and rotation control, custom fabricated	
L1847			KO, double upright with adjustable joint, with	
			inflatable air support chamber(s), prefabricated, includes fitting and adjustment	
L1850			KO, Swedish type, prefabricated, includes fitting and	
L1930			adjustment	
L1855	Y	Y	KO, molded plastic, thigh and calf sections, with	
L1033	1	1	double upright knee joints, custom fabricated	
L1858	Y	Y	KO, molded plastic, polycentric knee joints, pneumatic	
L1030	1	1	knee pads (CTI), custom fabricated	
L1860	Y	Y	KO, modification of supracondylar prosthetic socket,	
L1900	1	I	custom fabricated (SK)	
			custom rauticated (SIX)	

			1105010	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L1870	Y	Y	KO, double upright, thigh and calf lacers, with knee joints, custom fabricated	
L1880		Y	KO, double upright, nonmolded thigh and calf cuffs/lacers with knee joints, custom fabricated	
L1900		Y	AFO, spring wire, dorsiflexion assist calf band, custom fabricated	
L1901		***	Ankle orthosis, elastic, prefabricated, includes fitting and adjustment (e.g., neoprene, Lycra)	
L1902		***	AFO, ankle gauntlet, prefabricated, includes fitting and adjustment	
L1904		Y	AFO, molded ankle gauntlet, custom fabricated	
L1906		***	AFO, multiligamentus ankle support, prefabricated, includes fitting and adjustment	
L1907		Y	AFO, supramalleolar with straps, with or without interface/pads, custom fabricated	
L1910			AFO, posterior, single bar, clasp attachment to shoe counter, prefabricated, includes fitting and adjustment	
L1920		Y	AFO, single upright with static or adjustable stop (Phelps or Perlstein type), custom fabricated	
L1930			Ankle foot orthosis, plastic or other material, prefabricated, includes fitting and adjustment	
L1932			AFO, rigid anterior tibial section, total carbon fiber or equal material, prefabricated, includes fitting and adjustment	
L1940		Y	Ankle foot orthosis, plastic or other material, custom fabricated	
L1945	Y	Y	AFO, molded to patient model, plastic, rigid anterior tibial section (floor reaction), custom fabricated	See EPA criteria, pages E.5-E.7.
L1950	Y	Y	AFO, spiral, (IRM type), plastic, custom fabricated	
L1951	Y	Y	Ankle foot orthosis, spiral, (institute of rehabilitative medicine type), plastic or other material, prefabricated, includes fitting and adjustment	
L1960		Y	AFO, posterior solid ankle, plastic, custom fabricated	
L1970		Y	AFO, plastic, with ankle joint, custom fabricated	
L1971	Y	Y	Ankle foot orthosis, plastic or other material with ankle joint, prefabricated, includes fitting and adjustment	
L1980		Y	AFO, single upright free plantar dorsiflexion, solid stirrup, calf band/cuff (single bar "BK" orthosis), custom fabricated	
L1990		Y	AFO, double upright free plantar dorsiflexion, solid stirrup, calf band/cuff (double bar "BK" orthosis), custom fabricated	
L2000		Y	KAFO, single upright, free knee, free ankle, solid stirrup, thigh and calf bands/cuffs (single bar "AK" orthosis), custom fabricated	
L2005	Y	Y	Knee ankle foot orthosis, any material, single or double upright, stance control, automatic lock and swing phase release, mechanical activation, includes ankle joint, any type, custom fabricated	

L2010				Prosune	tic and Orthotic Devices
L2010	<b>Procedure</b>				Policy/
L2010	Code	PA	Lic	Description	~
and calf bands/culfs (single bar "AK" orthosis), without knee joint, custom fabricated  1.2020 Y KAFO, double upright, free knee, free ankle, solid stirrup, thigh and calf bands/culfs (double bar "AK" orthosis), custom fabricated  1.2030 Y KAFO, double upright, free ankle, solid stirrup, thigh and calf bands/culfs (double bar "AK" orthosis), without knee joint, custom fabricated  1.2034 Y Y Knee ankle foot orthosis, full plastic, single upright, with or without free motion knee, medial lateral rotation control, with or without free motion knee, medial lateral rotation control, with or without free motion knee, with or without free motion ankle, custom fabricated  1.2036 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  1.2037 Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  1.2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  1.2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  1.2050 Y HKAFO, torsion control, bilateral torsion cables, hilp joint, pelvic band/belt, custom fabricated  1.2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hijp joint, pelvic band/belt, custom fabricated  1.2070 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hijp joint, pelvic band/belt, custom fabricated  1.2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hijp joint, pelvic band/belt, custom fabricated  1.2108 Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  1.2114 AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  1.2115 AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  1.2116 AFO, fracture orthosis, tibial fracture cast orthosis, field, pre					
and calf bands/culfs (single bar "AK" orthosis), without knee joint, custom fabricated  1.2020 Y KAFO, double upright, free knee, free ankle, solid stirrup, thigh and calf bands/culfs (double bar "AK" orthosis), custom fabricated  1.2030 Y KAFO, double upright, free ankle, solid stirrup, thigh and calf bands/culfs (double bar "AK" orthosis), without knee joint, custom fabricated  1.2034 Y Y Knee ankle foot orthosis, full plastic, single upright, with or without free motion knee, medial lateral rotation control, with or without free motion knee, medial lateral rotation control, with or without free motion knee, with or without free motion ankle, custom fabricated  1.2036 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  1.2037 Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  1.2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  1.2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  1.2050 Y HKAFO, torsion control, bilateral torsion cables, hilp joint, pelvic band/belt, custom fabricated  1.2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hijp joint, pelvic band/belt, custom fabricated  1.2070 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hijp joint, pelvic band/belt, custom fabricated  1.2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hijp joint, pelvic band/belt, custom fabricated  1.2108 Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  1.2114 AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  1.2115 AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  1.2116 AFO, fracture orthosis, tibial fracture cast orthosis, field, pre	L2010		Y	KAFO single unright free ankle solid stirrun thigh	
L2020 Y KAFO, double upright, free knee, free ankle, solid stirrup, thigh and calf bands/cuffs (double bar "AK" orthosis), custom fabricated L2030 Y KAFO, double upright, free ankle, solid stirrup, thigh and calf bands/cuffs (double bar "AK" orthosis), without knee joint, custom fabricated  L2034 Y Knee ankle foot orthosis, full plastic, single upright, with or without free motion knee, medial lateral rotation control, with or without free motion without free motion without free motion knee, medial lateral rotation control, with or without free motion  L2035 KAFO, full plastic, static, (pediatric size), prefabricated, includes fitting and adjustment  KAFO, full plastic, double upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2037 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2038 Y Y KAFO, full plastic, with or without free motion hee, with or without free motion ankle, custom fabricated  L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2116 AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L21216 Y Y KAFO,	22010		•		
L2030 Y KAFO, double upright, free knee, free ankle, solid stirrup, thigh and calf bandscurfs (double bar "AK" orthosis), custom fabricated  L2030 Y KAFO, double upright, free ankle, solid stirrup, thigh and calf bandscurfs (double bar "AK" orthosis), without knee joint, custom fabricated  L2034 Y Y Knee ankle foot orthosis, full plastic, single upright, with or without free motion knee, medial lateral rotation control, with or without free motion knee, medial lateral rotation control, with or without free motion knee, midial lateral rotation control, with or without free motion knee, with or without free motion knee, with or without free motion knee, with or without free motion ankle, custom fabricated  L2036 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2037 Y Y KAFO, full plastic, with or without free motion ankle, custom fabricated  L2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  L2040 Y HKAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  L2040 Y HKAFO, torsion control, bilateral torsion cables, hilp joint, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hall bearing hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, unilateral torsion cable, hilp joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral torsion cable, hilp joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hilp joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, hall bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture cast orthosis, semi-rigid, prefabricated, includes fitting and adjustment  AFO, fract					
Stirrup, thigh and calf bands/cuffs (double bar "AK" orthosis), custom fabricated	L2020		Y		
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and calf bands/cuffs (double bar "AK" orthosis), without knee joint, custom fabricated  L2034 Y Knee ankle foot orthosis, full plastic, single upright, with or without free motion knee, medial lateral rotation control, with or without free motion  L2035 KAFO, full plastic, static, (pediatric size), prefabricated, includes fitting and adjustment  L2036 Y Y KAFO, full plastic, stube upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2037 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  L2040 Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  L2050 Y HKAFO, torsion control, bilateral trotation straps, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture cast orthosis,					
and calf bands/cuffs (double bar "AK" orthosis), without knee joint, custom fabricated  L2034 Y Y Knee ankle foot orthosis, full plastic, single upright, with or without free motion knee, medial lateral rotation control, with or without free motion  L2035 KAFO, full plastic, static, (pediatric size), prefabricated, includes fitting and adjustment  L2036 Y Y KAFO, full plastic, stouch upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2037 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  L2040 Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral rotsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral rotation cable, bil bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y HKAFO, torsion control, unilateral rotation cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2114 AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture corthosis, regid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture cast orthosis, rigid, prefabricated, includes fitting and adju	L2030		Y	KAFO, double upright, free ankle, solid stirrup, thigh	
L2034 Y Y Knee ankle foot orthosis, full plastic, single upright, with or without free motion knee, medial lateral rotation control, with or without free motion  L2035 KAFO, full plastic, static, (pediatric size), prefabricated, includes fitting and adjustment  L2036 Y Y X KAFO, full plastic, double upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2037 Y Y X KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2038 Y Y X KAFO, full plastic, single upright, with or without free motion knee, wi					
With or without free motion knee, medial lateral rotation control, with or without free motion					
L2035   KAPO, full plastic, static, (pediatric size), prefabricated, includes fitting and adjustment   L2036   Y   Y   KAFO, full plastic, double upright, with or without free motion knee, with or without free motion ankle, custom fabricated   L2037   Y   Y   KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated   L2038   Y   Y   KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated   L2040   Y   KAFO, full plastic, with or without free motion knee, with or without free motion ankle, ultitaxis ankle, (Lively orthosis or equal), custom fabricated   L2050   Y   HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated   L2060   Y   HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated   L2070   Y   HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated   L2080   Y   HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated   L2090   Y   HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated   L2106   Y   AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated   L2108   Y   Y   AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated, includes fitting and adjustment   L2114   AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment   L2116   AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment   L2116   AFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated   L2128   Y   Y   KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated	L2034	Y	Y		
L2035 KAFO, full plastic, static, (pediatric size), prefabricated, includes fitting and adjustment L2036 Y KAFO, full plastic, double upright, with or without free motion knee, with or without free motion ankle, custom fabricated L2037 Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated L2038 Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated L2040 Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, multiaxis ankle, (Lively orthosis or equal), custom fabricated L2050 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated L2108 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated L2112 AFO, fracture orthosis, tibial fracture cast orthosis, outsom fabricated, includes fitting and adjustment AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment AFO, fracture orthosis, tibial fracture orthosis, figid, prefabricated, includes fitting and adjustment AFO, fracture orthosis, tibial fracture cast orthosis, semirigid, prefabricated, includes fitting and adjustment AFO, fracture orthosis, tibial fracture cast orthosis, figid, prefabricated, includes fitting and adjustment AFO, fracture orthosis, themoplastic type casting material, custom fabricated				with or without free motion knee, medial lateral	
L2036 Y Y KAFO, full plastic, double upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2037 Y Y KAFO, full plastic, single upright, with or without free motion ankle, custom fabricated  L2038 Y Y KAFO, full plastic, with or without free motion ankle, custom fabricated  L2040 Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, multiaxis ankle, (Lively orthosis or equal), custom fabricated  L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, bil bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture cast orthosis, figid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture cast orthosis, semirigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture cast orthosis, figid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, themoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  C2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabr				rotation control, with or without free motion	
L2036 Y Y KAFO, full plastic, double upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2037 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated  L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture cast orthosis, rigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture cast orthosis, rigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture cast orthosis, rigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture cast orthosis, rigid, prefabricated, includes fitting and adjustment	L2035			KAFO, full plastic, static, (pediatric size),	
L2037 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated custom fabricated with or without free motion ankle, custom fabricated custom fabricated (Lively orthosis or equal), custom fabricated (Lively orthosis orthosion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated (Lively orthosis orthosion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated (Lively orthosis, custom fabricated (Lively orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated (Lively orthosis, tibial fracture cast orthosis, custom fabricated (Lively orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment (Lively orthosis, thermoplastic type casting material, custom fabricated (Lively orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment (Lively orthosis, thermoplastic type casting material, custom fabricated orthosis, thermoplastic type casting material, custo				prefabricated, includes fitting and adjustment	
L2037 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, custom fabricated (Lively orthosis or equal), custom fabricated  L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2120 AFO, fracture orthosis, tibial fracture cast orthosis, rigid, prefabricated, includes fitting and adjustment  L2121 AFO, fracture orthosis, tibial fracture cast orthosis, rigid, prefabricated, includes fitting and adjustment	L2036	Y	Y	KAFO, full plastic, double upright, with or without	
L2037 Y Y KAFO, full plastic, single upright, with or without free motion knee, with or without free motion ankle, custom fabricated  L2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, multiaxis ankle, (Lively orthosis or equal), custom fabricated  L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosi, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated, includes fitting and adjustment  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture cast orthosis, rigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, femoral fracture cast orthosis, includes fitting and adjustment  AFO, fracture orthosis, femoral fracture cast orthosis, fabricated  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, femoral fracture cast orthosis, femoral fracture cast orthosis, fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast					
motion knee, with or without free motion ankle, custom fabricated custom fabricated with or without free motion knee, with or without free motion knee, with or without free motion ankle, multiaxis ankle, (Lively orthosis or equal), custom fabricated with or without free motion ankle, multiaxis ankle, (Lively orthosis or equal), custom fabricated with or without free motion straps, pelvic band/belt, custom fabricated with piont, pelvic band/belt, custom fabricated with piont, pelvic band/belt, custom fabricated with piont, pelvic band/belt, custom fabricated with bearing hip joint, pelvic band/belt, custom fabricated with piont, pelvic band/belt,				custom fabricated	
L2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, multiaxis ankle, (Lively orthosis or equal), custom fabricated  L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated	L2037	Y	Y		
L2038 Y Y KAFO, full plastic, with or without free motion knee, with or without free motion ankle, multiaxis ankle, (Lively orthosis or equal), custom fabricated  L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated					
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L2040	L2038	Y	Y		
L2040 Y HKAFO, torsion control, bilateral rotation straps, pelvic band/belt, custom fabricated  L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast					
L2050 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast					
L2060 Y HKAFO, torsion control, bilateral torsion cables, hip joint, pelvic band/belt, custom fabricated  L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated	L2040		Y		
L2060 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated, includes fitting and adjustment  L2112 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast					
L2070 Y HKAFO, torsion control, bilateral torsion cables, ball bearing hip joint, pelvic band/belt, custom fabricated  L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2050		Y		
L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast					
L2070 Y HKAFO, torsion control, unilateral rotation straps, pelvic band/belt, custom fabricated  L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2060		Y		
L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast					
L2080 Y HKAFO, torsion control, unilateral torsion cable, hip joint, pelvic band/belt, custom fabricated  L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2070		Y		
L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast				1	
L2090 Y HKAFO, torsion control, unilateral torsion cable, ball bearing hip joint, pelvic band/belt, custom fabricated  L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2080		Y	-	
L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	1.0000		*7		
L2106 Y AFO, fracture orthosis, tibial fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2090		Y		
thermoplastic type casting material, custom fabricated  L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	1.0106		*7		
L2108 Y Y AFO, fracture orthosis, tibial fracture cast orthosis, custom fabricated  L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2106		Y		
L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	I 2100	V	V		
L2112 AFO, fracture orthosis, tibial fracture orthosis, soft, prefabricated, includes fitting and adjustment  L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2108	1	ĭ	· · · · · · · · · · · · · · · · · · ·	
L2114 AFO, fracture orthosis, tibial fracture orthosis, semi- rigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	I 2112				
L2114 AFO, fracture orthosis, tibial fracture orthosis, semirigid, prefabricated, includes fitting and adjustment  L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	12112				
L2116 rigid, prefabricated, includes fitting and adjustment  AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2114				
L2116 AFO, fracture orthosis, tibial fracture orthosis, rigid, prefabricated, includes fitting and adjustment  L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	22111				
L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2116				
L2126 Y Y KAFO, fracture orthosis, femoral fracture cast orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast					
orthosis, thermoplastic type casting material, custom fabricated  L2128 Y Y KAFO, fracture orthosis, femoral fracture cast	L2126	Y	Y		
L2128 Y Y KAFO, fracture orthosis, femoral fracture cast			-		
L2128 Y Y KAFO, fracture orthosis, femoral fracture cast					
	L2128	Y	Y		

Prosthetic and Orthotic Dev					
Procedure				Policy/	
Code	PA	Lic	Description	Comments	
L2132			KAFO, fracture orthosis, femoral fracture cast		
			orthosis, soft, prefabricated, includes fitting and		
			adjustment		
L2134			KAFO, fracture orthosis, femoral fracture cast		
			orthosis, semi-rigid, prefabricated, includes fitting and		
T 2126			adjustment		
L2136			KAFO, fracture orthosis, femoral fracture cast		
			orthosis, rigid, prefabricated, includes fitting and adjustment		
L2180			Addition to lower extremity fracture orthosis, plastic		
L2160			shoe insert with ankle joints		
L2182			Addition to lower extremity fracture orthosis, drop		
22102			lock knee joint		
L2184			Addition to lower extremity fracture orthosis, limited		
			motion knee joint		
L2186			Addition to lower extremity fracture orthosis,		
			adjustable motion knee joint, Lerman type		
L2188			Addition to lower extremity fracture orthosis,		
			quadrilateral brim		
L2190			Addition to lower extremity fracture orthosis, waist		
			belt		
L2192			Addition to lower extremity fracture orthosis, hip joint,		
7.000			pelvic band, thigh flange, and pelvic belt		
L2200			Addition to lower extremity, limited ankle motion,		
1 2210			each joint		
L2210			Addition to lower extremity, dorsiflexion assist (plantar flexion resist), each joint		
L2220			Addition to lower extremity, dorsiflexion and plantar		
L2220			flexion assist/resist, each joint		
L2230			Addition to lower extremity, split flat caliper stirrups		
22230			and plate attachment		
L2232	Y	Y	Addition to lower extremity orthosis, rocker bottom		
			for total contact ankle foot orthosis, for custom		
			fabricated orthosis only		
L2240			Addition to lower extremity, round caliper and plate		
			attachment		
L2250			Addition to lower extremity, foot plate, molded to		
1.00.00			patient model, stirrup attachment		
L2260			Addition to lower extremity, reinforced solid stirrup		
1.2265			(Scott-Craig type)		
L2265			Addition to lower extremity, long tongue stirrup		
L2270			Addition to lower extremity, varus/valgus correction ("T") strap, padded/lined or malleolus pad		
L2275			Addition to lower extremity, varus/valgus correction,		
12213			plastic modification, padded/lined		
L2280		Y	Addition to lower extremity, molded inner boot		
L2300		-	Addition to lower extremity, abduction bar (bilateral		
22300			hip involvement), jointed, adjustable		
L2310			Addition to lower extremity, abduction bar, straight		
L2320			Addition to lower extremity, nonmolded lacer		

			1108010	etic and Orthotic Devices
<b>Procedure</b>				Policy/
Code	PA	Lic	Description	Comments
			<u>.</u>	
L2330		Y	Addition to lower extremity, lacer molded to patient	
L2330		1	model	
1 2225				
L2335		***	Addition to lower extremity, anterior swing band	
L2340		Y	Addition to lower extremity, pretibial shell, molded to	
			patient model	
L2350		Y	Addition to lower extremity, prosthetic type, (BK)	
			socket, molded to patient model, (used for "PTB,"	
			"AFO" orthoses)	
L2360			Addition to lower extremity, extended steel shank	
L2370			Addition to lower extremity, Patten bottom	
L2375			Addition to lower extremity, torsion control, ankle	
			joint and half solid stirrup	
L2380			Addition to lower extremity, torsion control, straight	
			knee joint, each joint	
L2385			Addition to lower extremity, straight knee joint, heavy	
			duty, each joint	
L2387	Y		Addition to lower extremity, polycentric knee joint, for	
			custom fabricated knee ankle foot orthosis, each joint	
L2390			Addition to lower extremity, offset knee joint, each	
22370			joint	
L2395			Addition to lower extremity, offset knee joint, heavy	
12373			duty, each joint	
L2397			Addition to lower extremity orthosis, suspension	
L2371			sleeve	
L2405			Addition to knee joint, drop lock, each.	
L2403 L2415				
L2415			Addition to knee lock with integrated release	
			mechanism (bail, cable, or equal), any material, each joint	
1.2425			y .	
L2425			Addition to knee joint, disc or dial lock for adjustable	
T 2420			knee flexion, each joint	
L2430			Addition to knee joint, ratchet lock for active and	
T 2 102			progressive extension, each joint	
L2492			Addition to knee joint, lift loop for drop lock ring	
L2500			Addition to lower extremity, thigh/weight bearing,	
			gluteal/ischial weight bearing, ring	
L2510		Y	Addition to lower extremity, thigh/weight bearing,	
			quadri-lateral brim, molded to patient model	
L2520			Addition to lower extremity, thigh/weight bearing,	
			quadri-lateral brim, custom fitted	
L2525	Y	Y	Addition to lower extremity, thigh/weight bearing,	
			ischial containment/narrow M-L brim molded to	
			patient model	
L2526			Addition to lower extremity, thigh/weight bearing,	
			ischial containment/narrow M-L brim, custom fitted	
L2530			Addition to lower extremity, thigh/weight bearing,	
			lacer, nonmolded	
L2540		Y	Addition to lower extremity, thigh/weight bearing,	
			lacer, molded to patient model	
L2550			Addition to lower extremity, thigh/weight bearing,	
			high roll cuff	

L2570				1 I USUIIC	etic and Orthotic Devices
L2570 Addition to lower extremity, pelvic control, hip joint Clevis type, two position joint, each L2580 Addition to lower extremity, pelvic control, pelvic sling L2600 Addition to lower extremity, pelvic control, hip joint, Clevis type, or thrust bearing, free, each L2610 Addition to lower extremity, pelvic control, hip joint, Clevis or thrust bearing, lock, each L2610 Addition to lower extremity, pelvic control, hip joint, Clevis or thrust bearing, lock, each L2620 Addition to lower extremity, pelvic control, hip joint, adjustable flexion, each L2621 Addition to lower extremity, pelvic control, hip joint, adjustable flexion, each L2624 Addition to lower extremity, pelvic control, hip joint, adjustable flexion, extension, abduction control, each L2627 Y Y Addition to lower extremity, pelvic control, plastic, molded to patient model, reciprocating hip joint and cables L2628 Y Addition to lower extremity, pelvic control, metal frame, reciprocating hip joint and cables L2630 Addition to lower extremity, pelvic control, band and belt, unilateral L2640 Addition to lower extremity, pelvic control, band and belt, unilateral L2640 Addition to lower extremity, pelvic control, band and helt, bilateral L2650 Addition to lower extremity, pelvic control, band and helt, bilateral L2660 Addition to lower extremity, thoracic control, paraspinal uprights L2680 Addition to lower extremity, thoracic control, paraspinal uprights Addition to lower extremity, thoracic control, paraspinal uprights L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar L2760 Addition to lower extremity orthosis, plating chrome or nickel, per bar or joint L2760 Y Addition to lower extremity orthosis, material, per bar or joint L2760 Y Addition to lower extremity orthosis, support uprights plating chrome or nickel, per bar or joint L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar are joint L2780 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull L2810 Addition to lower	Procedure				Policy/
Clevis type, two position joint, each	Code	PA	Lic	Description	Comments
Clevis type, two position joint, each					
Clevis type, two position joint, each   Addition to lower extremity, pelvic control, pelvic sling   L2600	L2570			Addition to lower extremity, pelvic control, hip joint	
Sling					
L2600	L2580			Addition to lower extremity, pelvic control, pelvic	
Clevis type, or thrust bearing, free, each				sling	
L2620	L2600				
Clevis or thrust bearing, lock, each				• • • • • • • • • • • • • • • • • • • •	
L2620	L2610				
L2622	1.2620				
L2622	L2620				
L2624   Addition to lower extremity, pelvic control, hip joint, adjustable flexion, extension, abduction control, each	1 2622			•	
L2624   Addition to lower extremity, pelvic control, hip joint, adjustable flexion, extension, abduction control, each	L2022				
L2627 Y Y Addition to lower extremity, pelvic control, lastic, molded to patient model, reciprocating hip joint and cables  L2628 Y Addition to lower extremity, pelvic control, metal frame, reciprocating hip joint and cables  L2630 Addition to lower extremity, pelvic control, band and belt, unilateral  L2640 Addition to lower extremity, pelvic control, band and belt, unilateral  L2650 Addition to lower extremity, pelvic and thoracic control, glutcal pad, each  L2660 Addition to lower extremity, thoracic control, thoracic band  L2670 Addition to lower extremity, thoracic control, paraspinal uprights  L2680 Addition to lower extremity, thoracic control, lateral support uprights  L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2760 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2780 Addition to lower extremity orthosis, hece control, full kneecap  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	1.2624				
L2627 Y	22021				
molded to patient model, reciprocating hip joint and cables	L2627	Y	Y		
L2628					
Interest					
L2640	L2628	Y			
L2640 Addition to lower extremity, pelvic control, band and belt, bilateral  L2650 Addition to lower extremity, pelvic and thoracic control, gluteal pad, each  L2660 Addition to lower extremity, thoracic control, thoracic band  L2670 Addition to lower extremity, thoracic control, paraspinal uprights  L2680 Addition to lower extremity, thoracic control, lateral support uprights  L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2795 Addition to lower extremity orthosis, drop lock retainer, each  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,					
L2640	L2630				
L2650 Addition to lower extremity, pelvic and thoracic control, gluteal pad, each  L2660 Addition to lower extremity, thoracic control, thoracic band  L2670 Addition to lower extremity, thoracic control, paraspinal uprights  L2680 Addition to lower extremity, thoracic control, paraspinal uprights  L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	T 2640				
L2650	L2640				
L2660 Addition to lower extremity, thoracic control, thoracic band  L2670 Addition to lower extremity, thoracic control, paraspinal uprights  L2680 Addition to lower extremity, thoracic control, lateral support uprights  L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	1.2650				
L2660 Addition to lower extremity, thoracic control, thoracic band  L2670 Addition to lower extremity, thoracic control, paraspinal uprights  L2680 Addition to lower extremity, thoracic control, lateral support uprights  L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2030				
L2670 Addition to lower extremity, thoracic control, paraspinal uprights  L2680 Addition to lower extremity, thoracic control, lateral support uprights  L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2660				
L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2750 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	22000			· ·	
L2680 Addition to lower extremity, thoracic control, lateral support uprights  L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2670			Addition to lower extremity, thoracic control,	
L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,				paraspinal uprights	
L2750 Y Addition to lower extremity orthosis, plating chrome or nickel, per bar  L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2680			Addition to lower extremity, thoracic control, lateral	
L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,					
L2755 Y Addition to lower extremity orthosis, high strength, lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2750		Y		
lightweight material, all hybrid lamination/prepreg composite, per segment  L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,			**		
L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2755		Y		
L2760 Addition to lower extremity orthosis, extension, per extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,					
extension, per bar (for lineal adjustment for growth)  L2768 Y Y Orthotic side bar disconnect device, per bar  L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	I 2760				
L2768       Y       Y       Orthotic side bar disconnect device, per bar         L2770       Y       Addition to lower extremity orthosis, any material, per bar or joint         L2780       Y       Addition to lower extremity orthosis, noncorrosive finish, per bar         L2785       Addition to lower extremity orthosis, drop lock retainer, each         L2795       Addition to lower extremity orthosis, knee control, full kneecap         L2800       Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull         L2810       Addition to lower extremity orthosis, knee control,	22700				
L2770 Y Addition to lower extremity orthosis, any material, per bar or joint  L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2768	Y	Y		
L2780 Y Addition to lower extremity orthosis, noncorrosive finish, per bar  L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,				•	
L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,					
L2785 Addition to lower extremity orthosis, drop lock retainer, each  L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2780		Y		
L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,				*	
L2795 Addition to lower extremity orthosis, knee control, full kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2785			· · · · · · · · · · · · · · · · · · ·	
L2800 Kneecap  L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	1.050.5				
L2800 Addition to lower extremity orthosis, knee control, kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	L2795			· ·	
kneecap, medial or lateral pull  L2810 Addition to lower extremity orthosis, knee control,	1 2000				
L2810 Addition to lower extremity orthosis, knee control,	L2800				
	1.2810				
	12010				

			Trosum	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L2820		Y	Addition to lower extremity orthosis, soft interface for	
			molded plastic, below knee section	
L2830		Y	Addition to lower extremity orthosis, soft interface for	
			molded plastic, above knee section	
L2840			Addition to lower extremity orthosis, tibial length	
T 20.50			sock, fracture or equal, each	
L2850			Addition to lower extremity orthosis, femoral length	
L2860			sock, fracture or equal, each Addition to lower extremity joint, knee or ankle,	
L2800			concentric adjustable torsion style mechanism, each	
L2999	Y	Y	Lower extremity orthoses, not otherwise specified	
L3000	Y		Foot insert, removable, molded to patient model,	See EPA criteria, pages E.5-
25000	•		"UCB" type, Berkeley Shell, each	E.7.
L3001			Foot insert, removable, molded to patient model,	
			Spenco, each.	
L3002			Foot insert, removable, molded to patient model,	
			Plastazote or equal, each	
L3003			Foot insert, removable, molded to patient model,	
			silicone gel, each	
L3010			Foot insert, removable, molded to patient model,	
			longitudinal arch support, each	
L3020			Foot insert, removable, molded to patient model,	
1 2020	37		longitudinal/metatarsal support, each	G EDAG': E 5
L3030	Y		Foot insert, removable, formed to patient foot, each	See EPA Criteria, pages E.5- E.7.
L3031	Y		Foot, insert/plate, removable, addition to lower	L.7.
L3031	1		extremity orthosis, high strength, lightweight material,	
			all hybrid lamination/prepreg composite, each	
L3040			Foot, arch support, removable, premolded,	
			longitudinal, each	
L3050			Foot, arch support, removable, premolded, metatarsal,	
			each	
L3060			Foot, arch support, removable, premolded	
1.2070			longitudinal/metatarsal, each	
L3070			Foot, arch support, nonremovable, attached to shoe, longitudinal, each	
L3080			Foot, arch support, nonremovable, attached to shoe,	
L3000			metatarsal, each	
L3090			Foot, arch support, nonremovable, attached to shoe,	
			longitudinal/metatarsal, each	
L3100			Hallus-Valgus night dynamic splint	
L3140			Foot, abduction rotation bar, including shoes	
L3150			Foot, abduction rotation bar, without shoes	
L3160			Foot, adjustable shoe-styled positioning device	
L3170	Y		Foot, plastic, silicone or equal, heel stabilizer, each.	
L3201			Orthopedic shoe, oxford with supinator or pronator, infant	
L3202			Orthopedic shoe, oxford with supinator or pronator, child	
L3203			Orthopedic shoe, oxford with supinator or pronator,	
			junior	

			1105010	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L3204			Orthopedic shoe, hightop with supinator or pronator, infant	
L3206			Orthopedic shoe, hightop with supinator or pronator, child	
L3207			Orthopedic shoe, hightop with supinator or pronator, junior	
L3208			Surgical boot, each, infant	
L3209			Surgical boot, each, child	
L3211			Surgical boot, each, junior	
L3212			Benesch boot, pair, infant	
L3213			Benesch boot, pair, child	
L3214			Benesch boot, pair, junior	
L3215	Y		Orthopedic footwear, ladies shoe, oxford, each	See EPA criteria, pages E.5-E.7.
L3216			Orthopedic footwear, ladies shoe, depth inlay, each	
L3217			Orthopedic footwear, ladies shoe, hightop, depth inlay,	
			each	
L3219	Y		Orthopedic footwear, mens shoe, oxford, each	See EPA criteria, pages E.5-E.7.
L3221			Orthopedic footwear, mens shoe, each. depth inlay	
L3222			Orthopedic footwear, mens shoe, hightop, depth inlay, each	
L3224			Orthopedic footwear, woman's shoe, oxford, used as an integral part of brace (orthosis)	
L3225			Orthopedic footwear, man's shoe, oxford, used as an integral part of a brace (orthosis)	
L3230	Y		Orthopedic footwear, custom shoe, depth inlay, each.	
L3250			Orthopedic footwear, custom molded shoe, removable	
			inner mold, prosthetic shoe, each	
L3251			Foot, shoe molded to patient model, silicone shoe, each	
L3252			Foot, shoe molded to patient model, Plastazote (or	
			similar), custom fabricated, each	
L3253			Foot, molded shoe Plastazote (or similar), custom fitted, each	
L3254			Nonstandard size or width	
L3255			Nonstandard size or length	
L3257			Orthopedic footwear, additional charge for split size	
L3260			Surgical boot/shoe, each	
L3265			Plastazote sandal, each	
L3300	Y		Lift, elevation, heel, tapered to metatarsals, per inch	Soo EDA oritorio E 5 E 7
L3310 L3320	Y		Lift, elevation, heel and sole, neoprene, per inch Lift, elevation, heel and sole, cork, per inch	See EPA criteria E.5-E.7. See EPA criteria E.5-E.7.
L3320 L3330	1		Lift, elevation, neel and sole, cork, per inch  Lift, elevation, metal extension (skate)	SCE EFA CHICHA E.J-E./.
L3332			Lift, elevation, inetal extension (skate)  Lift, elevation, inside shoe, tapered, up to one-half inch	
L3334	Y		Lift, elevation, heel, per inch	See EPA criteria E.5-E.7.
L3340	Y		Heel wedge, SACH	BOO ELA CHICHA E.J-E./.
L3350	Y		Heel wedge	
L3360	Y		Sole wedge, outside sole	
_5550		L		l .

Prosthetic and Orthotic Devices				
Procedure				Policy/
Code	PA	Lic	Description	Comments
		,		
L3370			Sole wedge, between sole	
L3380			Clubfoot wedge	
L3390			Outflare wedge	
L3400	Y		Metatarsal bar wedge, rocker	
L3410	Y		Metatarsal bar wedge, between sole	
L3420	Y		Full sole and heel wedge, between sole	
L3430			Heel, counter, plastic reinforced	
L3440			Heel, counter, leather reinforced	
L3450			Heel, SACH cushion type	
L3455			Heel, new leather, standard	
L3460			Heel, new rubber, standard	
L3465			Heel, Thomas with wedge	
L3470			Heel, Thomas extended to ball	
L3480			Heel, pad and depression for spur	
L3485			Heel, pad, removable for spur	
L3500			Orthopedic shoe addition, insole, leather	
L3510			Orthopedic shoe addition, insole, rubber	
L3520			Orthopedic shoe addition, insole, felt covered with	
			leather	
L3530			Orthopedic shoe addition, sole, half	
L3540			Orthopedic shoe addition, sole, full	
L3550			Orthopedic shoe addition, toe tap, standard	
L3560			Orthopedic shoe addition, toe tap, horseshoe	
L3570			Orthopedic shoe addition, special extension to instep	
			(leather with eyelets)	
L3580			Orthopedic shoe addition, convert instep to velcro	
			closure	
L3590			Orthopedic shoe addition, convert firm shoe counter to	
			soft counter	
L3595			Orthopedic shoe addition, March bar	
L3600			Transfer of an orthosis from one shoe to another,	
7.2510			caliper plate, existing	
L3610			Transfer of an orthosis from one shoe to another,	
L3620			caliper plate, new Transfer of an orthosis from one shoe to another, solid	One in a 12 month named
L3020			stirrup, existing.	One in a 12-month period allowed without prior
			stirup, existing.	authorization
L3630			Transfer of an orthosis from one shoe to another, solid	
			stirrup, new	
L3640			Transfer of an orthosis from one shoe to another,	
			Dennis Browne splint (Riveton), both shoes	
L3649			Orthopedic shoe, modification, addition or transfer,	
			not otherwise specified	
L3650		***	SO, figure of eight design abduction restrainer,	
			prefabricated, includes fitting and adjustment	
L3651		***	SO, single shoulder, elastic, prefabricated, includes	
			fitting and adjustment (e.g., neoprene, Lycra)	
L3652		***	SO, double shoulder, elastic, prefabricated, includes	
			fitting and adjustment (e.g., neoprene, Lycra)	

L3660				Trobine	ene and Orthone Devices
L3660   *** SO, figure of eight design abduction restrainer, canvas and webbing, prefabricated, includes fitting and adjustment					•
and webbing, prefabricated, includes fitting and adjustment  SO, aeromio/clavicular (canvas and webbing type), prefabricated, includes fitting and adjustment  SO, shoulder cap design, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3672 Y Y SO, abduction positioning (airplane design), thoracic component and support bar, without joints, may include soft interface, straps, custom include soft interface, straps, custom fabricated, includes fitting and adjustment  SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment  SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment  L3677 Y Y Shoulder orthosis, hard plastic, shoulder stabilizer, prefabricated, includes fitting and adjustment  L3700 *** FO, elastic, includes fitting and adjustment  EO, elastic with stays, prefabricated, includes fitting and adjustment  L3701 *** EO, elastic, prefabricated, includes fitting and adjustment  EO, elastic, prefabricated, includes off interface, straps, custom fabricated, includes fitting and adjustment  EO, elastic with metal joints, prefabricated, includes fitting and adjustment  EO, double upright with forearm/arm cuffs, free motion, custom fabricated  L3710 *** EO, double upright with forearm/arm cuffs, free motion, custom fabricated  EO, double upright with forearm/arm cuffs, extension/flexion lock with active control, custom fabricated  EO, with adjustment  EO, with adjustment prefabricated, includes fitting and adjustment profit for profit for profit for profit in the forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with adjustment for profit with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with adjustment for profit in the forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with dujatushelp position locking joints, prefabricated, incl	Code	PA	Lic	Description	Comments
and webbing, prefabricated, includes fitting and adjustment  SO, aeromio/clavicular (canvas and webbing type), prefabricated, includes fitting and adjustment  SO, shoulder cap design, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3672 Y Y SO, abduction positioning (airplane design), thoracic component and support bar, includes soft interface, straps, custom include soft interface, straps, custom include soft interface, straps, custom fabricated, includes fitting and adjustment  L3673 Y SO, abduction positioning (airplane design), thoracic component and support bar, includes nontrosion joint/turnbuckle, may include soft interface, straps, custom fabricated, includes fitting and adjustment  SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment  L3677 Y Y Shoulder orthosis, hard plastic, shoulder stabilizer, prefabricated, includes fitting and adjustment  L3700 *** BO, elastic with strays, prefabricated, includes fitting and adjustment  L3701 *** EO, elastic, prefabricated, includes fitting and adjustment  L3702 Y Y EO, data includes fitting and adjustment  L3710 *** EO, clastic, prefabricated, includes fitting and adjustment  EO, elastic with metal joints, prefabricated, includes fitting and adjustment  EO, double upright with forearm/arm cuffs, free motion, custom fabricated  L3720 EO, double upright with forearm/arm cuffs, free motion, custom fabricated  L3740 Y Y EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with adjustment  EO, elastic with metal joints, includes soft interface  EO, with adjustment pright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with adjustment includes fitting and adjustment  EO, with adjustment pright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with adjustment pright with forearm/arm cuffs, adjustable position					
and webbing, prefabricated, includes fitting and adjustment  L3670	L3660		***	SO, figure of eight design abduction restrainer, canvas	
L3670   *** SO, acromio/clavicular (canvas and webbing type), prefabricated, includes fitting and adjustment					
L3671 Y Y SO, shoulder cap design, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3672 Y Y SO, abduction positioning (airplane design), thoracic component and support bar, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3673 Y SO, abduction positioning (airplane design), thoracic component and support bar, includes nontorsion joint/turnbuckle, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3675 SO, est type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment  L3677 Y Y Shoulder orthosis, hard plastic, shoulder stabilizer, prefabricated, includes fitting and adjustment  L3700 *** EO, elastic with stays, prefabricated, includes fitting and adjustment  EO, elastic, prefabricated, includes fitting and adjustment  EO, elastic, prefabricated, includes fitting and adjustment eg., ensoprene, Lycra)  L3702 Y EO, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  EO, elastic with metal joints, prefabricated, includes fitting and adjustment  EO, double upright with forearm/arm cuffs, free motion, custom fabricated  EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated  EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated  EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with adjustable position, locking joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3760 ** EO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  EO, elastic, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  EO, elastic bands, turnbuckles, may include soft interfac					
L3671 Y Y SO, shoulder cap design, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment L3672 Y Y SO, abduction positioning (airplane design), thoracic component and support bar, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment L3673 Y SO, abduction positioning (airplane design), thoracic component and support bar, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment L3677 Y Y Shoulder orthosis, hard plastic, shoulder stabilizer, prefabricated, includes fitting and adjustment L3700 *** EO, elastic with stays, prefabricated, includes fitting and adjustment L3700 *** EO, elastic, prefabricated, includes fitting and adjustment EO, elastic, prefabricated, includes fitting and adjustment L3710 *** EO, elastic, prefabricated, includes fitting and adjustment (e.g., neoprene, Lycra) L3720 Y EO, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment EO, elastic with metal joints, prefabricated, includes fitting and adjustment L3710 *** EO, double upright with forearm/arm cuffs, free motion, custom fabricated EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated EO, double upright with forearm/arm cuffs, adjustable position look with active control, custom fabricated EO, with adjustable position, locking joints, prefabricated, includes fitting and adjustment EO, elastic, includes fitting and adjustment EO, elastic, with adjustable position look with active control, custom fabricated EO, with adjustable position look with active control, custom fabricated EO, with adjustable position look with active control, custom fabricated EO, with adjustable position look off interface, straps, custom fabricated, includes fitting and adjustment EO, elastic bands, turnbuckles, may include sof	L3670		***	SO, acromio/clavicular (canvas and webbing type),	
L3671					
L3672 Y Y SO, abduction positioning (airplane design), thoracic component and support bar, without joints, may include soft interface, straps, custom   L3673 Y SO, abduction positioning (airplane design), thoracic component and support bar, includes nontorsion joint/turnbuckle, may include soft interface, straps, custom fabricated, includes fitting and adjustment   L3675 SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment   L3677 Y Shoulder orthosis, hard plastic, shoulder stabilizer, prefabricated, includes fitting and adjustment   L3700	L3671	Y	Y	SO, shoulder cap design, without joints, may include	
L3672 Y Y SO, abduction positioning (airplane design), thoracic component and support bar, without joints, may include soft interface, straps, custom support bar, uniformative support bar, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment EO, elastic with stays, prefabricated, includes fitting and adjustment EO, elastic with stays, prefabricated, includes fitting and adjustment EO, elastic, prefabricated, includes fitting and adjustment etc., neoprene, Lycra)  L3701 **** EO, elastic, prefabricated, includes fitting and adjustment EO, elastic with stays, prefabricated, includes fitting and adjustment etc., neoprene, Lycra  L3702 Y Y EO, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment etc., and				soft interface, straps, custom fabricated, includes	
L3673 Y   SO, abduction positioning (airplane design), thoracic component and support bar, includes nontrosion joint/turnbuckle, may include soft interface, straps, custom fabricated, includes fitting and adjustment					
L3673 Y SO, abduction positioning (airplane design), thoracic component and support bar, includes nontorsion joint/tumbuckle, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3675 SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment  L3677 Y Y Y Shoulder orthosis, hard plastic, shoulder stabilizer, prefabricated, includes fitting and adjustment  L3700 **** EO, elastic with stays, prefabricated, includes fitting and adjustment  L3701 **** EO, elastic, prefabricated, includes fitting and adjustment  L3702 Y Y Y EO, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3710 **** EO, elastic with metal joints, prefabricated, includes fitting and adjustment  EO, elastic with metal joints, prefabricated, includes fitting and adjustment  EO, double upright with forearm/arm cuffs, free motion, custom fabricated  L3730 Y Y EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated  L3740 Y EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  L3760 EO, without joints, includes soft interface  L3762 *** EO, rigid, without joints, includes of interface material, prefabricated, includes fitting and adjustment  L3764 Y EWHO, rigid, without joints, may include soft interface straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment	L3672	Y	Y	SO, abduction positioning (airplane design), thoracic	
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component and support bar, includes nontorsion join/turnbuckle, may include soft interface, straps, custom fabricated, includes fitting and adjustment  SO, vest type abduction restrainer, canvas webbing type, or equal, prefabricated, includes fitting and adjustment  L3677 Y Y Shoulder orthosis, hard plastic, shoulder stabilizer, prefabricated, includes fitting and adjustment  EO, elastic with stays, prefabricated, includes fitting and adjustment  L3701 **** EO, elastic, prefabricated, includes fitting and adjustment (e.g., neoprene, Lycra)  L3702 Y Y EO, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3710 **** EO, elastic with metal joints, prefabricated, includes fitting and adjustment  L3720 EO, double upright with forearm/arm cuffs, free motion, custom fabricated  L3730 Y Y EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated  L3740 Y EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  L3760 EO, with adjustable position, locking joints, prefabricated, includes fitting and adjustment  L3762 **** EO, rigid, without joints, includes soft interface material, prefabricated, includes fitting and adjustment  L3764 Y Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment					
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type, or equal, prefabricated, includes fitting and adjustment  L3677 Y Shoulder orthosis, hard plastic, shoulder stabilizer, prefabricated, includes fitting and adjustment  L3700 *** EO, elastic with stays, prefabricated, includes fitting and adjustment  L3701 *** EO, elastic, prefabricated, includes fitting and adjustment (e.g., neoprene, Lycra)  L3702 Y Y EO, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3710 *** EO, elastic with metal joints, prefabricated, includes fitting and adjustment  E3720 EO, double upright with forearm/arm cuffs, free motion, custom fabricated  L3730 Y Y EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated  L3740 Y EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  L3760 EO, with adjustable position, locking joints, prefabricated, includes fitting and adjustment, any type  L3762 *** EO, rigid, without joints, includes soft interface material, prefabricated, includes fitting and adjustment  L3763 Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment				custom fabricated, includes fitting and adjustment	
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L3700	L3677	Y	Y	Shoulder orthosis, hard plastic, shoulder stabilizer,	
L3701				prefabricated, includes fitting and adjustment	
L3701	L3700		***	EO, elastic with stays, prefabricated, includes fitting	
L3702 Y Y EO, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3710 *** EO, elastic with metal joints, prefabricated, includes fitting and adjustment  EO, double upright with forearm/arm cuffs, free motion, custom fabricated  L3730 Y Y EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated  L3740 Y Y EO, double upright with forearm/arm cuffs, apustable position lock with active control, custom fabricated  EO, with adjustable position, locking joints, prefabricated, includes fitting and adjustment, any type  EO, rigid, without joints, includes soft interface material, prefabricated, includes fitting and adjustment  L3763 Y Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment				and adjustment	
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L3710				adjustment (e.g., neoprene, Lycra)	
L3720 *** EO, elastic with metal joints, prefabricated, includes fitting and adjustment  EO, double upright with forearm/arm cuffs, free motion, custom fabricated  L3730 Y Y EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated  L3740 Y Y EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with adjustable position, locking joints, prefabricated, includes fitting and adjustment, any type  L3762 *** EO, rigid, without joints, includes soft interface material, prefabricated, includes fitting and adjustment  L3763 Y Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom	L3702	Y	Y	EO, without joints, may include soft interface, straps,	
L3720				custom fabricated, includes fitting and adjustment	
L3720	L3710		***	EO, elastic with metal joints, prefabricated, includes	
L3730 Y Y EO, double upright with forearm/arm cuffs, extension/flexion assist, custom fabricated  L3740 Y Y EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  L3760 EO, with adjustable position, locking joints, prefabricated, includes fitting and adjustment, any type  L3762 *** EO, rigid, without joints, includes soft interface material, prefabricated, includes fitting and adjustment  L3763 Y Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom					
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L3740 Y Y EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  L3760 EO, with adjustable position, locking joints, prefabricated, includes fitting and adjustment, any type  L3762 *** EO, rigid, without joints, includes soft interface material, prefabricated, includes fitting and adjustment  L3763 Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment				motion, custom fabricated	
L3740 Y Y EO, double upright with forearm/arm cuffs, adjustable position lock with active control, custom fabricated  EO, with adjustable position, locking joints, prefabricated, includes fitting and adjustment, any type  L3762 *** EO, rigid, without joints, includes soft interface material, prefabricated, includes fitting and adjustment  L3763 Y Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment	L3730	Y	Y	EO, double upright with forearm/arm cuffs,	
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L3763 Y Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y S EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom				prefabricated, includes fitting and adjustment, any type	
L3763 Y Y EWHO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom	L3762		***	EO, rigid, without joints, includes soft interface	
interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom				material, prefabricated, includes fitting and adjustment	
interface, straps, custom fabricated, includes fitting and adjustment  L3764 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom	L3763	Y	Y		
L3764 Y Y EWHO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom				interface, straps, custom fabricated, includes fitting	
bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom				and adjustment	
bands, turnbuckles, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom	L3764	Y	Y	EWHO, includes one or more nontorsion joints, elastic	
L3765 Y Y EWHFO, rigid, without joints, may include soft interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom				bands, turnbuckles, may include soft interface, straps,	
interface, straps, custom fabricated, includes fitting and adjustment  L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom				custom fabricated, includes fitting and adjustment	
L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom	L3765	Y	Y		
L3766 Y Y EWHFO, includes one or more nontorsion joints, elastic bands, turnbuckles, may include soft interface, straps, custom					
elastic bands, turnbuckles, may include soft interface, straps, custom				· ·	
straps, custom	L3766	Y	Y		
I 2000 V WHEO short amount in the first section				straps, custom	
	L3800		Y	WHFO, short opponens, no attachments, custom	
fabricated				fabricated	

			1105010	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L3805		Y	WHFO, long opponens, no attachments, custom	
			fabricated	
L3807			WHFO without joint(s), prefabricated, includes fitting	
			and adjustment, any type	
L3810			WHFO, addition to short and long opponens, thumb	
			abduction ("C") Bar	
L3815			WHFO, addition to short and long opponens, second	
			M.P. abduction assist	
L3820			WHFO, addition to short and long opponens, I.P.	
			extension assist, with M. P. extension stop	
L3825			WHFO, addition to short and long opponens, M.P.	
			extension stop	
L3830			WHFO, addition to short and long opponens, M.P.	
			extension assist	
L3835			WHFO, addition to short and long opponens, M.P.	
T 20.10			spring extension assist	
L3840			WHFO, addition to short and long opponens, spring	
1 2045			swivel thumb	
L3845			WHFO, addition to short and long opponens, thumb	
1.2950			I.P. extension assist, with M.P. stop	
L3850			WHO, addition to short and long opponens, action wrist, with dorsiflexion assist	
L3855			WHFO, addition to short and long opponens,	
L3633			adjustable M.P. flexion control	
L3860			WHFO, addition to short and long opponens,	
L3000			adjustable M.P. flexion control and I.P.	
L3890			Addition to upper extremity joint, wrist or elbow,	
25070			concentric adjustable torsion style mechanism, each	
L3900		Y	WHFO, dynamic flexor hinge, reciprocal wrist	
			extension/flexion, finger flexion/extension, wrist or	
			finger driven, custom fabricated	
L3901	Y	Y	WHFO, dynamic flexor hinge, reciprocal wrist	
			extension/flexion, finger flexion/extension, cable	
			driven, custom fabricated	
L3902	Y	Y	WHFO, external powered, compressed gas, custom	
			fabricated	
L3904	Y	Y	WHFO, external powered, electric, custom fabricated	
L3905	Y	Y	WHO, includes one or more nontorsion joints, elastic	
			bands, turnbuckles, may include soft interface, straps,	
			custom fabricated, includes	
L3906		Y	WHO, without joints, may include soft interface,	
			straps, custom fabricated, includes fitting and	
1.2007		37	adjustment.	
L3907		Y	WHFO, wrist gauntlet with thumb spica, molded to	
1 2000		***	patient model, custom fabricated	
L3908		7.77	WHO, wrist extension control cock-up, nonmolded,	
L3909		***	prefabricated, includes fitting and adjustments Wrist orthosis, elastic, prefabricated, includes fitting	
L3707			and adjustment (e.g., neoprene, Lycra)	
L3910			WHFO, Swanson design, prefabricated, includes	
123710			fitting and adjustments	
			many and adjustments	

			1 i Ostiic	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L3911			Wrist hand finger orthosis, elastic, prefabricated,	
			includes fitting and adjustments (e.g., neoprene,	
			Lycra)	
L3912		***	HFO, flexion glove with elastic finger control,	
			prefabricated, includes fitting and adjustments	
L3914		***	WHO, wrist extension cock-up, prefabricated, includes	
			fitting and adjustments	
L3916			WHFO, wrist extension cock-up, with outrigger,	
			prefabricated, includes fitting and adjustments	
L3917			HO, metacarpal fracture orthosis, prefabricated,	
			includes fitting	
L3918			HFO, knuckle bender, prefabricated, includes fitting	
			and adjustments	
L3919	Y	Y	Hand orthosis, without joints, may include soft	
			interface, straps, custom fabricated, includes fitting	
			and adjustment	
L3920			HFO, knuckle bender, with outrigger, prefabricated,	
			includes fitting and adjustments	
L3921	Y	Y	Hand finger orthosis, includes one or more nontorsion	
			joints, elastic bands, turnbuckles, may include soft	
			interface, straps, custom fabricated, includes fitting	
1 2022			and adjustment	
L3922			HFO, knuckle bender, two segment to flex joints,	
1 2022			prefabricated, includes fitting and adjustments	Description of the first
L3923			HFO, without joints, may include soft interface, straps, prefabricated, includes fitting and adjustment	Description was revised.
L3924			WHFO, Oppenheimer, prefabricated, includes fitting	
L3924			and adjustments	
L3926			WHFO, Thomas suspension, prefabricated, includes	
L3720			fitting and adjustments	
L3928		***	HFO, finger extension, with clock spring,	
23720			prefabricated, includes fitting and adjustments	
L3930		***	WHFO, finger extension, with wrist support,	
			prefabricated, includes fitting and adjustments	
L3932		***	FO, safety pin, spring wire, prefabricated, includes	
			fitting and adjustments	
L3933	Y	Y	Finger orthosis, without joints, may include soft	
			interface, custom fabricated, includes fitting and	
			adjustment	
L3934		***	FO, safety pin, modified, prefabricated, includes	
			fitting and adjustments	
L3935	Y	Y	Finger orthosis, nontorsion joint, may include soft	
			interface, custom fabricated, includes fitting and	
			adjustment	
L3936			WHFO, Palmer, prefabricated, includes fitting and	
			adjustments	
L3938			WHFO, dorsal wrist, prefabricated, includes fitting	
			and adjustments	
L3940			WHFO, dorsal wrist, with outrigger attachment,	
			prefabricated, includes fitting and adjustments	

			1108010	tic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
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L3942			HFO, reverse knuckle bender, prefabricated, includes	
			fitting and adjustments	
L3944			HFO, reverse knuckle bender, with outrigger,	
			prefabricated, includes fitting and adjustments	
L3946			HFO, composite elastic, prefabricated, includes fitting	
			and adjustments	
L3948			FO, finger knuckle bender, prefabricated, includes	
			fitting and adjustments	
L3950			WHFO, combination Oppenheimer, with knuckle	
			bender and two attachments, prefabricated, includes	
			fitting and adjustments	
L3952			WHFO, combination Oppenheimer, with reverse	
			knuckle and two attachments, prefabricated, includes	
			fitting and adjustments	
L3954			HFO, spreading hand, prefabricated, includes fitting	
			and adjustments	
L3956	Y	Y	Addition of joint to upper extremity orthosis, any	
			material; per joint	
L3960			SEWHO, abduction positioning, airplane design,	
			prefabricated, includes fitting and adjustments	
L3961	Y	Y	Shoulder elbow wrist hand orthosis, shoulder cap	
			design, without joints, may include soft interface,	
			straps, custom fabricated, includes fitting and	
			adjustment	
L3962			SEWHO, abduction positioning, Erb's palsey design,	
			prefabricated, includes fitting and adjustments	
L3964			SEO, mobile arm support attached to wheelchair,	
			balanced, adjustable, prefabricated, includes fitting	
			and adjustments	
L3965			SEO, mobile arm support attached to wheelchair,	
			balanced, adjustable Rancho type, prefabricated,	
			includes fitting and adjustments	
L3966			SEO, mobile arm support attached to wheelchair,	
			balanced, reclining, prefabricated, includes fitting and	
			adjustments	
L3967	Y		SEWHO, abduction positioning (airplane design),	
			thoracic component and support bar, without joints,	
			may include soft interface, straps, custom fabricated,	
1.00.00			includes fitting and adjustmeent	
L3968			SEO, mobile arm support attached to wheelchair,	
			balanced, friction arm support (friction dampening to	
			proximal and distal joints), prefabricated, includes fitting and adjustments	
I 2060	V			
L3969	Y		SEO, mobile arm support, monosuspension arm and hand support, overhead elbow forearm hand sling	
			support, yoke type arm suspension support,	
			prefabricated, includes fitting and adjustments	
L3970			SEO, addition to mobile arm support, elevating	
L37/U			proximal arm	
L3971	Y		SEWHO, shoulder cap design, includes one or more	
L37/1	1		nontorsion joints, elastic bands, turnbuckles, may	
			include soft interface	
			merado port miterrace	

			Trostne	and Orthoug Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L3972			SEO, addition to mobile arm support, offset or lateral	
L3712			rocker arm with elastic balance control	
L3973	Y		SEWHO, abduction positioning (airplane design),	
L3973	1		thoracic component and support bar, includes one or	
			more nontorsion joints	
1.2074				
L3974	37	3.7	SEO, addition to mobile arm support, supinator	
L3975	Y	Y	SEWHFO, shoulder cap design, without joints, may	
			include soft interface, straps, custom fabricated,	
T 205 6	**		includes fitting and adjustment	
L3976	Y		SEWHFO, abduction positioning (airplane design),	
			thoracic component and support bar, without joints,	
			may include soft interface, straps, custom fabricated,	
			includes fitting and adjustment	
L3977	Y		SEWHFO, shoulder cap design, includes one or more	
			nontorsion joints, elastic bands, turnbuckles, may	
			include soft interface, straps, custom fabricated,	
			includes fitting aand adjustment	
L3978	Y		SEWHFO, abduction positioning (airplane design),	
			thoracic component and support bar, includes one or	
			more nontorsion	
L3980		***	Upper extremity fracture orthosis, humeral,	
			prefabricated, includes fitting and adjustments	
L3982			Upper extremity fracture orthosis, radius/ulnar,	
			prefabricated, includes fitting and adjustments	
L3984			Upper extremity fracture orthosis, wrist, prefabricated,	
			includes fitting and adjustments	
L3985		Y	Upper extremity fracture orthosis, forearm, hand with	
			wrist hinge, custom fabricated	
L3986		Y	Upper extremity fracture orthosis, combination of	
			humeral, radius/ulnar, wrist (example: Colles'	
			fracture), custom fabricated	
L3995			Addition to upper extremity orthosis, sock, fracture or	
			equal, each	
L3999	Y	Y	Upper limb orthosis, not otherwise specified	
L4000	Y	Y	Replace girdle for spinal orthosis (CTLSO or SO)	
L4002	Y	Y	Replacement strap, any orthosis, includes all	
			components, any length, any type	
L4010		Y	Replace trilateral socket brim	
L4020		Y	Replace quadrilateral socket brim, molded to patient	
2.020		•	model	
L4030		Y	Replace quadrilateral socket brim, custom fitted	
L4040		Y	Replace molded thigh lacer	
L4040 L4045		Y		
			Replace nonmolded thigh lacer	
L4050		Y	Replace molded calf lacer	
L4055		Y	Replace nonmolded calf lacer	
L4060		Y	Replace high roll cuff	
L4070		Y	Replace proximal and distal upright for KAFO	
L4080		Y	Replace metal bands KAFO, proximal thigh	
L4090		Y	Replace metal bands KAFO-AFO, calf or distal thigh	
L4100		Y	Replace leather cuff KAFO, proximal thigh	
L4110		Y	Replace leather cuff KAFO–AFO, calf or distal thigh	
			, , , , , ,	

			Trostite	ent and Orthout Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L4130		Y	Replace pretibial shell	
L4205	Y	Y	Repair of orthotic device, labor component, per 15 minutes	
L4210	Y	Y	Repair of orthotic device, repair or replace minor parts	
L4350		***	Pneumatic ankle control splint (e.g., aircast),	
			prefabricated, includes fitting and adjustments	
L4360	Y		Pneumatic ankle foot orthosis, with or without joints, prefabricated, includes fitting and adjustments	
L4370	Y	***	Pneumatic full leg splint (e.g., aircast), prefabricated, includes fitting and adjustments	
L4380		***	Pneumatic knee splint (e.g., aircast), prefabricated, includes fitting and adjustments	
L4386	Y	***	Non-pneumatic walking splint, with or without joints, prefabricated, includes fitting and adjustments	
L4392			Replacement soft interface material, static AFO	
L4394			Replace soft interface material, foot drop splint	
L4396	Y		Static ankle foot orthosis, including soft interface	
			material, adjustable for fit, for positioning, pressure	
			reduction, may be used for minimal ambulation,	
			prefabricated, includes fitting and adjustment	
L4398			Foot drop splint, recumbent positioning device,	
1.5000		N/	prefabricated, includes fitting and adjustment	
L5000		Y	Partial foot, shoe insert with longitudinal arch, toe filler	
L5010		Y	Partial foot, molded socket, ankle height, with toe filler	
L5020		Y	Partial foot, molded socket, tibial tubercle height, with toe filler	
L5050		Y	Ankle, Symes, molded socket, SACH Foot	
L5060	Y	Y	Ankle, Symes, metal frame, molded leather socket, articulated ankle/foot	
L5100		Y	Below knee, molded socket, shin, SACH foot	
L5105	Y	Y	Below knee, plastic socket, joints and thigh lacer, SACH foot	
L5150	Y	Y	Knee disarticulation (or through knee), molded socket, external knee joints, shin, SACH foot	
L5160	Y	Y	Knee disarticulation (or through knee), molded socket,	
			bent knee configuration, external knee joints, shin, SACH foot	
L5200		Y	Above knee, molded socket, single axis constant friction knee, shin, SACH foot	
L5210		Y	Above knee, short prosthesis, no knee joint ("stubbies"), with foot blocks, no ankle joints, each	
L5220	Y	Y	Above knee, short prosthesis, no knee joint ("stubbies"), with articulated ankle/foot, dynamically aligned, each	
L5230	Y	Y	Above knee, for proximal femoral focal deficiency, constant friction knee, shin, SACH foot	
L5250	Y	Y	Hip disarticulation, Canadian type; molded socket, hip joint, single axis constant friction knee, shin, SACH foot	

			1 TUSLITE	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L5270	Y	Y	Hip disarticulation, tilt table type; molded socket,	
			locking hip joint, single axis constant friction knee,	
			shin, SACH foot	
L5280	Y	Y	Hemipelvectomy, Canadian type; molded socket, hip	
			joint, single axis constant friction knee, shin, SACH	
			foot	
L5301		Y	Below knee, molded socket, shin, SACH foot,	
I 5211		37	endoskeletal system	
L5311		Y	Knee disarticulation (or through knee), molded socket,	
			external knee joints, shin, SACH foot, endoskeletal system	
L5321		Y	Above knee, molded socket, open end, SACH foot,	
L3321		1	endoskeletal system, single axis knee	
L5331		Y	Hip disarticulation, Canadian type, molded socket,	
23331		-	endoskeletal system, hip joint, single axis knee, SACH	
			foot	
L5341		Y	Hemipelvectomy, Canadian type, molded socket,	
			endoskeletal system, hip joint, single axis knee, SACH	
			foot	
L5400		Y	Immediate postsurgical or early fitting, application of	
			initial rigid dressing, including fitting, alignment,	
Y 7.440		**	suspension, and one cast change, below knee	
L5410		Y	Immediate postsurgical or early fitting, application of	
			initial rigid dressing, including fitting, alignment and suspension, below knee, each additional cast change	
			and realignment	
L5420		Y	Immediate postsurgical or early fitting, application of	
20.20		_	initial rigid dressing, including fitting, alignment and	
			suspension and one cast change AK or knee	
			disarticulation	
L5430		Y	Immediate postsurgical or early fitting, application of	
			initial rigid dressing, including fitting, alignment and	
			suspension, AK or knee disarticulation, each	
Y 7 4 7 0		**	additional cast change and realignment	
L5450		Y	Immediate postsurgical or early fitting, application of	
L5460		Y	nonweight bearing rigid dressing, below knee Immediate postsurgical or early fitting, application of	
L3400		1	nonweight bearing rigid dressing, above knee	
L5500		Y	Initial, below knee PTB type socket, non-alignable	
23300		-	system, pylon, no cover, SACH foot, plaster socket,	
			direct formed	
L5505	Y	Y	Initial, above knee – knee disarticulation, ischial level	
			socket, non-alignable system, pylon, no cover, SACH	
			foot plaster socket, direct formed	
L5510		Y	Preparatory, below knee PTB type socket, non-	Limit one per client per
			alignable system, pylon, no cover, SACH foot, plaster	lifetime per limb
7 776			socket, molded to model	
L5520		Y	Preparatory, below knee PTB type socket, non-	Limit one per client per
			alignable system, pylon, no cover, SACH foot,	lifetime per limb
			thermoplastic or equal, direct formed	

			rrostile	etic and Orthotic Devices
<b>Procedure</b>				Policy/
Code	PA	Lic	Description	Comments
L5530	Y	Y	Preparatory, below knee PTB type socket, non-	
			alignable system, pylon, no cover, SACH foot,	
			thermoplastic or equal, molded to model	
L5535	Y	Y	Preparatory, below knee PTB type socket, non-	
			alignable system, pylon, no cover, SACH foot,	
			prefabricated, adjustable open end socket	
L5540	Y	Y	Preparatory, below knee PTB type socket, non-	
			alignable system, pylon, no cover, SACH foot,	
			laminated socket, molded to model	
L5560	Y	Y	Preparatory, above knee – knee disarticulation, ischial	
			level socket, non-alignable system, pylon, no cover,	
			SACH foot, plaster socket, molded to model	
L5570	Y	Y	Preparatory, above knee - knee disarticulation, ischial	
			level socket, non-alignable system, pylon, no cover,	
1.5500	3.7	3.7	SACH foot, thermoplastic or equal, direct formed	
L5580	Y	Y	Preparatory, above knee – knee disarticulation, ischial	
			level socket, non-alignable system, pylon, no cover,	
T 5505	V	V	SACH foot, thermoplastic or equal, molded to model	
L5585	Y	Y	Preparatory, above knee – knee disarticulation, ischial	
			level socket, non-alignable system, pylon, no cover, SACH foot, prefabricated adjustable open end socket	
L5590	Y	Y	Preparatory, above knee – knee disarticulation, ischial	
L3390	1	1	level socket, non-alignable system, pylon, no cover,	
			SACH foot, laminated socket, molded to model	
L5595	Y	Y	Preparatory, hip disarticulation – hemipelvectomy,	
13373	•		pylon, no cover, SACH foot, thermoplastic or equal,	
			molded to patient model	
L5600	Y	Y	Preparatory, hip disarticulation – hemipelvectomy,	
			pylon, no cover, SACH foot, laminated socket, molded	
			to patient model	
L5610	Y	Y	Addition to lower extremity, endoskeletal system,	
			above knee, hydracadence system	
L5611	Y	Y	Addition to lower extremity, endoskeletal system,	
			above knee - knee disarticulation, 4-bar linkage, with	
			friction swing phase control	
L5613	Y	Y	Addition to lower extremity, endoskeletal system,	
			above knee - knee disarticulation, 4-bar linkage, with	
			hydraulic swing phase control	
L5614	Y	Y	Addition to lower extremity, endoskeletal system,	
			above knee - knee disarticulation, 4-bar linkage, with	
T 77 - 1 -		**	pneumatic swing phase control	
L5616		Y	Addition to lower extremity, endoskeletal system,	
			above knee, universal multiplex system, friction swing	
I 5617		<b>1</b> 7	phase control	
L5617		Y	Addition to lower extremity, quick change self-	
I 5610		V	aligning unit, above or below knee, each	
L5618		Y	Addition to lower extremity, test socket, Symes	
L5620		Y	Addition to lower extremity, test socket, below knee	
L5622		Y	Addition to lower extremity, test socket, knee disarticulation	
15604		V		
L5624		Y	Addition to lower extremity, test socket, above knee	

			Trostite	ic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L5626		Y	Addition to lower extremity, test socket, hip	
			disarticulation	
L5628		Y	Addition to lower extremity, test socket,	
			hemipelvectomy	
L5629		Y	Addition to lower extremity, below knee, acrylic	
			socket	
L5630		Y	Addition to lower extremity, Symes type, expandable	
Y 7 501		**	wall socket	
L5631		Y	Addition to lower extremity, above knee or knee	
L5632		Y	disarticulation, acrylic socket	
L3032		Y	Addition to lower extremity, Symes type, PTB brim design socket	
L5634		Y	Addition to lower extremity, Symes type, posterior	
L3034		1	opening (Canadian) socket	
L5636		Y	Addition to lower extremity, Symes type, medial	
			opening socket	
L5637		Y	Addition to lower extremity, below knee, total contact	
L5638	Y	Y	Addition to lower extremity, below knee, leather	
			socket	
L5639	Y	Y	Addition to lower extremity, below knee, wood socket	
L5640	Y	Y	Addition to lower extremity, knee disarticulation,	
			leather socket	
L5642	Y	Y	Addition to lower extremity, above knee, leather	
			socket	
L5643	Y	Y	Addition to lower extremity, hip disarticulation,	
			flexible inner socket, external frame	
L5644	Y	Y	Addition to lower extremity, above knee, wood socket	
L5645	Y	Y	Addition to lower extremity, below knee, flexible	
L5646	37	37	inner socket, external frame	
L3040	Y	Y	Addition to lower extremity, below knee, air cushion socket	
L5647	Y	Y	Addition to lower extremity, below knee, suction	
L3047	1	1	socket	
L5648	Y	Y	Addition to lower extremity, above knee, air cushion	
22010	•	•	socket	
L5649		Y	Addition to lower extremity, ischial	
			containment/narrow M-L socket	
L5650		Y	Addition to lower extremity, total contact, above knee	
			or knee disarticulation socket	
L5651		Y	Addition to lower extremity, above knee, flexible inner	
			socket, external frame	
L5652		Y	Addition to lower extremity, suction suspension,	
1.5.550		<b>T</b> 7	above knee or knee disarticulation socket	
L5653		Y	Addition to lower extremity, knee disarticulation,	
L5654		Y	expandable wall socket	
L3034		ĭ	Addition to lower extremity, socket insert, Symes (Kemblo, Pelite, Aliplast, Plastazote or equal)	
L5655		Y	Addition to lower extremity, socket insert, below knee	
13033		1	(Kemblo, Pelite, Aliplast, Plastazote or equal)	
	l	L	[ [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [	

	1		1 1 USUIC	etic and Orthotic Devices
<b>Procedure</b>				Policy/
Code	PA	Lic	Description	Comments
L5656		Y	Addition to lower extremity, socket insert, knee	
L3030		1	disarticulation (Kemblo, Pelite, Aliplast, Plastazote or	
			equal)	
L5658	Y	Y	Addition to lower extremity, socket insert, above knee	
25050	-	-	(Kemblo, Pelite, Aliplast, Plastazote or equal)	
L5661	Y	Y	Addition to lower extremity, socket insert,	
25001	•	•	multidurometer, Symes	
L5665		Y	Addition to lower extremity, socket insert,	
2000		-	multidurometer, below knee	
L5666		Y	Addition to lower extremity, below knee, cuff	
2000		-	suspension	
L5668		Y	Addition to lower extremity, below knee, molded	
			distal cushion	
L5670		Y	Addition to lower extremity, below knee, molded	
			supracondylar suspension (PTS or similar)	
L5671		Y	Addition to lower extremity, below knee/above knee	
			suspension locking mechanism (shuttle, lanyard or	
			equal), excludes socket insert	
L5672		Y	Addition to lower extremity, below knee, removable	
			medial brim suspension	
L5673		Y	Addition to lower extremity, below knee/above knee,	
			custom fabricated from existing mold or prefabricated,	
			socket insert, silicone gel, elastomeric or equal, for use	
			with locking mechanism	
L5676		Y	Addition to lower extremity, below knee, knee joints,	
			single axis, pair	
L5677	Y	Y	Addition to lower extremity, below knee, knee joints,	
1.5.570		* 7	polycentric, pair	
L5678		Y	Addition to lower extremity, below knee, joint covers,	
1.5.670		* 7	pair	
L5679		Y	Addition to lower extremity, below knee/above knee,	
			custom fabricated from existing mold or prefabricated, socket insert, silicone gel, elastomeric or equal, not for	
			use with locking mechanism	
L5680		Y	Addition to lower extremity, below knee, thigh lacer,	
L3000		1	nonmolded	
L5681	Y	Y	Addition to lower extremity, below knee/above knee,	
25001	1	1	custom fabricated socket insert for congenital or	
			atypical traumatic amputee, silicone gel, elastomeric	
			or equal, for use with or without locking mechanism,	
			initial only (for other than initial, use code L5673 or	
			L5679)	
L5682	Y	Y	Addition to lower extremity, below knee, thigh lacer,	
			gluteal/ischial, molded	
L5683	Y	Y	Addition to lower extremity, below knee/above knee,	
			custom fabricated socket insert for other than	
			congenital or atypical traumatic amputee, silicone gel,	
			elastomeric or equal, for use with or without locking	
			mechanism, initial only (for other than initial, use code	
1.5604		<b>3</b> 7	L5673 or L5679)	
L5684		Y	Addition to lower extremity, below knee, fork strap	

	Prosthetic and Orthotic Devices					
Procedure				Policy/		
Code	PA	Lic	Description	Comments		
	•					
L5685		Y	Addition to lower extremity prosthesis, below knee,			
			suspension/sealing sleeve, with or without valve, any			
			material, each			
L5686		Y	Addition to lower extremity, below knee, back check			
			(extension control)			
L5688		Y	Addition to lower extremity, below knee, waist belt,			
			webbing			
L5690		Y	Addition to lower extremity, below knee, waist belt,			
			padded and lined			
L5692		Y	Addition to lower extremity, above knee, pelvic			
			control belt, light			
L5694		Y	Addition to lower extremity, above knee, pelvic			
			control belt, padded and lined			
L5695		Y	Addition to lower extremity, above knee, pelvic			
			control, sleeve suspension, neoprene or equal, each			
L5696		Y	Addition to lower extremity, above knee or knee			
7.505		**	disarticulation, pelvic joint			
L5697		Y	Addition to lower extremity, above knee or knee			
1.5.000		3.7	disarticulation, pelvic band			
L5698		Y	Addition to lower extremity, above knee or knee			
1.5600		37	disarticulation, Silesian bandage			
L5699		Y	All lower extremity prostheses, shoulder harness	T		
L5700		Y	Replacement, socket, below knee, molded to patient model	Limit one per client per year		
L5701		Y	Replacement, socket, above knee/knee disarticulation,	Limit one per client per year		
L3701		1	including attachment plate, molded to patient model	Limit one per chefit per year		
L5702	Y	Y	Replacement, socket, hip disarticulation, including hip			
L3702	1	1	joint, molded to patient model			
L5703	Y	Y	Ankle, symes, molded to patient model, socket without			
20.00	-	-	solid ankle cushion heel (sach) foot, replacement only			
L5704	Y	Y	Custom shaped protective cover, below knee			
L5705	Y	Y	Custom shaped protective cover, above knee			
L5706	Y	Y	Custom shaped protective cover, knee disarticulation			
L5707	Y	Y	Custom shaped protective cover, hip disarticulation			
L5710	-	Y	Addition, exoskeletal knee-shin system, single axis,			
		_	manual lock			
L5711		Y	Addition, exoskeletal knee-shin system, single axis,			
			manual lock, ultra-light material			
L5712		Y	Addition, exoskeletal knee-shin system, single axis,			
			friction swing and stance phase control (safety knee)			
L5714		Y	Addition, exoskeletal knee-shin system, single axis,			
			variable friction swing phase control			
L5716	Y	Y	Addition, exoskeletal knee-shin system, polycentric,			
			mechanical stance phase lock			
L5718	Y	Y	Addition, exoskeletal knee-shin system, polycentric,			
			friction swing and stance phase control			
L5722		Y	Addition, exoskeletal knee-shin system, single axis,			
			pneumatic swing, friction stance phase control			
L5724	Y	Y	Addition, exoskeletal knee-shin system, single axis,			
			fluid swing phase control			

L5726				1108016	etic and Orthotic Devices
L5726	Procedure				Policy/
L5728 Y Y Addition, exoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5780 Y Addition, exoskeletal knee-shin system, single axis, pneumatic/hydra pneumatic swing phase control  L5781 Y Y Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system  L5782 Y Y Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5785 Y Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, bing disarticulation, ultra-light material (titanium, carbon fiber or equal)  L5810 Y Addition, exoskeletal system, bing disarticulation, ultra-light material (titanium carbon fiber or equal)  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5812 Y Addition, endoskeletal knee-shin system, single axis, manual lock ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing phase control, mechanical stance phase lock  L5822 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control, with miniature high activity frame activity fra	Code	PA	Lic	Description	Comments
L5728 Y Y Addition, exoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5780 Y Addition, exoskeletal knee-shin system, single axis, pneumatic/hydra pneumatic swing phase control  L5781 Y Y Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system  L5782 Y Y Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5785 Y Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, bing disarticulation, ultra-light material (titanium, carbon fiber or equal)  L5810 Y Addition, exoskeletal system, bing disarticulation, ultra-light material (titanium carbon fiber or equal)  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5812 Y Addition, endoskeletal knee-shin system, single axis, manual lock ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing phase control, mechanical stance phase lock  L5822 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control, with miniature high activity frame activity fra					
L5728 Y Y Addition, exoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5780 Y Addition, exoskeletal knee-shin system, single axis, pneumatic/hydra pneumatic swing phase control  L5781 Y Y Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system  L5782 Y Y Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5785 Y Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, bing disarticulation, ultra-light material (titanium, carbon fiber or equal)  L5810 Y Addition, exoskeletal system, bing disarticulation, ultra-light material (titanium carbon fiber or equal)  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5812 Y Addition, endoskeletal knee-shin system, single axis, manual lock ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing phase control, mechanical stance phase lock  L5822 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control, with miniature high activity frame activity fra	I 5726	Y	Y	Addition exoskeletal knee-ship system single axis	
1.5728	L3720	1	1		
L5780	1.5728	V	V		
L5780	L3726	1	1		
Denumatic/hydra pneumatic swing phase control	1.5790		V		
L5781	L3/80		1		
residual limb volume management and moisture evacuation system evacuation system, heavy duty  L5782 Y Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, heavy duty  L5785 Y Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, hip disarticulation, ultra- light material (titanium arbon fiber or equal)  L5810 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5846 Y Y Addition, endoskeletal knee-shin system, shape axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, shape axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, shance flexion feature, adjustable  L5848 Y Y Addition, endoskeletal	I 5701	V	V		
L5782 Y Y Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, heavy duty  L5785 Y Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, above knee, ultra-light material (titanium carbon fiber or equal)  L5810 Y Addition, exoskeletal system, hip disarticulation, ultra-light material (titanium carbon fiber or equal)  L5810 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5825 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5846 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5847 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5848 Y Y Addition, endosk	L3/81	1	1		
L5782					
residual limb volume management and moisture evacuation system, heavy duty  L5785 Y Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5790 Y Addition, exoskeletal system, big disarticulation, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, hip disarticulation, ultra- light material (titanium carbon fiber or equal)  L5810 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5829 Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5820 Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5845 Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5850 Y Addition, endoskeletal knee-shin system, bydraulic	1.5792	V	V		
L5785 Y Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, in glisarticulation, ultra-light material (titanium carbon fiber or equal)  L5810 Y Addition, exoskeletal system, bing disarticulation, ultra-light material (titanium carbon fiber or equal)  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5811 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5812 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control  L5828 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5829 Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5820 Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5820 Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, store flexion feature, adjustable  L5840 Y Addition,	L3/82	Y	Y		
L5785 Y Addition, exoskeletal system, below knee, ultra-light material (titanium, carbon fiber or equal)  L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, hip disarticulation, ultra-light material (titanium carbon fiber or equal)  L5810 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5828 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5830 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Addition, endoskeletal knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, adpove knee or hip					
L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, hip disarticulation, ultra-light material (titanium carbon fiber or equal)  L5810 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5826 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control, with miniature high activity frame  L5828 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5830 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Addition, endoskeletal knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal specentrol phase control	1 5705		V		
L5790 Y Addition, exoskeletal system, above knee, ultra-light material (titanium, carbon fiber or equal)  L5795 Y Addition, exoskeletal system, hip disarticulation, ultra-light material (titanium carbon fiber or equal)  L5810 Y Addition, endoskeletal knee-shin system, single axis, manual lock  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5850 Y Addition, endoskeletal knee-shin system, bydraulic stance extension, dampening feature, adjustable	L3/83		1	•	
L5795	1.5700		37		
L5810 Y Addition, endoskeletal knee-shin system, single axis, manual lock ultra-light material (titanium carbon fiber or equal)  L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase control  L5822 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5848 Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5850 Y Addition, endoskeletal knee-shin system, stance	L5/90		Y		
L5810	1.5705		***		
L5810 Y Addition, endoskeletal knee-shin system, single axis, manual lock L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee) L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control L5845 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control L5845 Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control L5848 Y Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable L5848 Y Y Addition, endoskeletal knee-shin system, hydraulic stance extension, dampening feature, adjustable L5850 Y Addition, endoskeletal system, above knee or hip	L5/95		Y		
L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5848 Y Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal, knee-shin system, above knee or hip	7.7010				
L5811 Y Addition, endoskeletal knee-shin system, single axis, manual lock, ultra-light material  L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5846 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5847 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5848 Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5810		Y		
L5812	7.7011				
L5812 Y Addition, endoskeletal knee-shin system, single axis, friction swing and stance phase control (safety knee)  L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5848 Y Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5840 Y Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Addition, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5811		Y		
L5814 Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5822 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
L5814 Y Y Addition, endoskeletal knee-shin system, polycentric, hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5845 Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5850 Y Addition, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5812		Y		
hydraulic swing phase control, mechanical stance phase lock  L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5814	Y	Y		
L5816 Y Addition, endoskeletal knee-shin system, polycentric, mechanical stance phase lock  L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
mechanical stance phase lock					
L5818 Y Addition, endoskeletal knee-shin system, polycentric, friction swing and stance phase control  L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5816		Y		
L5822				*	
L5822 Y Addition, endoskeletal knee-shin system, single axis, pneumatic swing, friction stance phase control  L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5818		Y		
Description of the process of the					
L5824 Y Addition, endoskeletal knee-shin system, single axis, fluid swing phase control  L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5822		Y		
In the standard of the stand					
L5826 Y Y Addition, endoskeletal knee-shin system, single axis, hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5824		Y		
hydraulic swing phase control, with miniature high activity frame  L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5826	Y	Y		
L5828 Y Y Addition, endoskeletal knee-shin system, single axis, fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
fluid swing and stance phase control  L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
L5830 Y Y Addition, endoskeletal knee-shin system, single axis, pneumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5828	Y	Y		
Description of the preumatic/swing phase control  L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
L5840 Y Y Addition, endoskeletal knee-shin system, 4-bar linkage or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5830	Y	Y		
or multiaxial, pneumatic swing phase control  L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
L5845 Addition, endoskeletal knee-shin system, stance flexion feature, adjustable  L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5840	Y	Y		
In the distance of the dista					
L5848 Y Y Addition to, endoskeletal, knee-shin system, hydraulic stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip	L5845				
stance extension, dampening feature, adjustable  L5850 Y Addition, endoskeletal system, above knee or hip					
L5850 Y Addition, endoskeletal system, above knee or hip	L5848	Y	Y		
				stance extension, dampening feature, adjustable	
	L5850		Y	Addition, endoskeletal system, above knee or hip	

			Trosuic	tic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L5855		Y	Addition, endoskeletal system, hip disarticulation,	
			mechanical hip extension assist	
L5856	Y	Y	Addition to lower extremity prosthesis, endoskeletal	
			knee-shin system, microprocessor control feature,	
			swing and stance phase, includes electronic sensor(s),	
			any type	
L5857	Y	Y	Addition to lower extremity prosthesis, endoskeletal	
			knee-shin system, microprocessor control feature,	
			swing phase only, includes electronic sensor(s), any	
1,5050			type	
L5858			Addition to lower extremity prosthesis, endoskeletal	
			knee shin system, microprocessor control feature, stance phase only, includes electronic sensor(s), any	
			type	
L5910		Y	Addition, endoskeletal system, below knee, alignable	
L3710		1	system	
L5920		Y	Addition, endoskeletal system, above knee or hip	
23,20		1	disarticulation, alignable system	
L5925		Y	Addition, endoskeletal system, above knee, knee	
			disarticulation or hip disarticulation, manual lock	
L5930			Addition, endoskeletal system, high activity knee	
			control frame	
L5940	Y	Y	Addition, endoskeletal system, below knee, ultra-light	
			material (titanium, carbon fiber or equal)	
L5950	Y	Y	Addition, endoskeletal system, above knee, ultra-light	
			material (titanium, carbon fiber or equal)	
L5960	Y	Y	Addition, endoskeletal system, hip disarticulation,	
			ultra-light material (titanium, carbon fiber or equal)	
L5962	Y	Y	Addition, endoskeletal system, below knee, flexible	
			protective outer surface covering system	
L5964	Y	Y	Addition, endoskeletal system, above knee, flexible	
T 70 66	**	**	protective outer surface covering system	
L5966	Y	Y	Addition, endoskeletal system, hip disarticulation,	
1.50.60	3.7	3.7	flexible protective outer surface covering system	
L5968	Y	Y	Addition to lower limb prosthesis, multiaxial ankle	
L5970	Y	Y	with swing phase action dorsiflexion feature All lower extremity prostheses, foot, external keel,	
L39/U	1	1	SACH foot	
L5971	Y	Y	All lower extremity prosthesis, solid ankle cushion	
137/1	1	1	heel (sach) foot, replacement only	
L5972		Y	All lower extremity prostheses, flexible keel foot (safe,	
		_	sten, bock dynamic or equal)	
L5974		Y	All lower extremity prostheses, foot, single axis	
			ankle/foot	
L5975		Y	All lower extremity prosthesis, combination single	
			axis and flexible keel foot	
L5976		Y	All lower extremity prostheses, energy storing foot	
			(Seattle carbon copy II or equal)	
L5978		Y	All lower extremity prostheses, foot, multi-axial	
			ankle/foot	

			1 TOSTILET	ic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
	·			
L5979	Y	Y	All lower extremity prostheses, multi-axial ankle,	
			dynamic response foot, one piece system	
L5980	Y	Y	All lower extremity prostheses, flex-foot system	
L5981	Y	Y	All lower extremity prostheses, flex-walk system or	
			equal	
L5982	Y	Y	All exoskeletal lower extremity prostheses, axial	
			rotation unit	
L5984	Y	Y	All endoskeletal lower extremity prostheses, axial	
			rotation unit	
L5985	Y	Y	All endoskeletal lower extremity prostheses, dynamic	
			prosthetic pylon	
L5986	Y	Y	All lower extremity prostheses, multi-axial rotation	
			unit (MCP or equal)	
L5987			All lower extremity prostheses, shank foot system with	
			vertical loading pylon	
L5988	Y	Y	Addition to lower limb prosthesis, vertical shock	
			reducing pylon feature	
L5990	Y	Y	Addition to lower extremity prosthesis, user adjustable	
			heel height	
L5995	Y	Y	Addition to lower extremity prosthesis, heavy duty	
			feature (for patient weight > 300 lbs)	
L5999	Y	Y	Lower extremity prosthesis, not otherwise specified	
L6000	Y	Y	Partial hand, Robin-Aids, thumb remaining (or equal)	
L6010	Y	Y	Partial hand, Robin-Aids, little and/or ring finger	
			remaining (or equal)	
L6020	Y	Y	Partial hand, Robin-Aids, no finger remaining (or	
			equal)	
L6025	Y	Y	Transcarpal/metacarpal or partial hand disarticulation	
			prosthesis, external power, self-suspended, inner	
			socket with removable forearm section, electrodes and	
			cables, two batteries, charger, myoelectric control of	
			terminal device	
L6050		Y	Wrist disarticulation, molded socket, flexible elbow	
			hinges, triceps pad	
L6055	Y	Y	Wrist disarticulation, molded socket with expandable	
			interface, flexible elbow hinges, triceps pad	
L6100		Y	Below elbow, molded socket, flexible elbow hinge,	
			triceps pad	
L6110		Y	Below elbow, molded socket (Muenster or	
			Northwestern suspension types)	
L6120	Y	Y	Below elbow, molded double wall split socket, step-up	
			hinges, half cuff	
L6130	Y	Y	Below elbow, molded double wall split socket, stump	
			activated locking hinge, half cuff	
L6200		Y	Elbow disarticulation, molded socket, outside locking	
			hinge, forearm	
L6205	Y	Y	Elbow disarticulation, molded socket with expandable	
			interface, outside locking hinges, forearm	
L6250		Y	Above elbow, molded double wall socket, internal	
			locking elbow, forearm	

	1		Trostne	etic and Orthotic Devices
<b>Procedure</b>				Policy/
Code	PA	Lic	Description	Comments
			<u>.                                      </u>	
L6300		Y	Shoulder disarticulation, molded socket, shoulder	
L0300		1	bulkhead, humeral section, internal locking elbow,	
			forearm	
L6310	Y	Y	Shoulder disarticulation, passive restoration (complete	
L0310	1	1	prosthesis)	
L6320	Y	Y	Shoulder disarticulation, passive restoration (shoulder	
L0320	1	1	cap only)	
L6350	Y	Y		
L0330	Y	Y	Interscapular thoracic, molded socket, shoulder	
			bulkhead, humeral section, internal locking elbow, forearm	
1.6260	37	37		
L6360	Y	Y	Interscapular thoracic, passive restoration (complete	
I (270	*7	*7	prosthesis)	
L6370	Y	Y	Interscapular thoracic, passive restoration (shoulder	
7 1200			cap only)	
L6380		Y	Immediate postsurgical or early fitting, application of	
			initial rigid dressing, including fitting alignment and	
			suspension of components, and one cast change, wrist	
T 5202		**	disarticulation or below elbow	
L6382		Y	Immediate postsurgical or early fitting, application of	
			initial rigid dressing including fitting alignment and	
			suspension of components, and one cast change, elbow	
			disarticulation or above elbow	
L6384		Y	Immediate postsurgical or early fitting, application of	
			initial rigid dressing including fitting alignment and	
			suspension of components, and one cast change,	
			shoulder disarticulation or interscapular thoracic	
L6386		Y	Immediate postsurgical or early fitting, each additional	
			cast change and realignment	
L6388		Y	Immediate postsurgical or early fitting, application of	
			rigid dressing only	
L6400		Y	Below elbow, molded socket, endoskeletal system,	
			including soft prosthetic tissue shaping	
L6450	Y	Y	Elbow disarticulation, molded socket, endoskeletal	
			system, including soft prosthetic tissue shaping	
L6500		Y	Above elbow, molded socket, endoskeletal system,	
			including soft prosthetic tissue shaping	
L6550		Y	Shoulder disarticulation, molded socket, endoskeletal	
			system, including soft prosthetic tissue shaping	
L6570		Y	Interscapular thoracic, molded socket, endoskeletal	
			system, including soft prosthetic tissue shaping	
L6580	Y	Y	Preparatory, wrist disarticulation or below elbow,	
			single wall plastic socket, friction wrist, flexible elbow	
			hinges, figure of eight harness, humeral cuff, Bowden	
			cable control, USMC or equal pylon, no cover, molded	
			to patient model	
L6582	Y	Y	Preparatory, wrist disarticulation or below elbow,	
			single wall socket, friction wrist, flexible elbow	
			hinges, figure of eight harness, humeral cuff, Bowden	
			cable control, USMC or equal pylon, no cover, direct	
			formed	

			1105th	ene and Orthone Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
			<u>.                                      </u>	
L6584	Y	Y	Preparatory, elbow disarticulation or above elbow,	
L0304	1	1	single wall plastic socket, friction wrist, locking	
			elbow, figure of eight harness, fair lead cable control,	
			USMC or equal pylon, no cover, molded to patient	
			model	
L6586	Y	Y	Preparatory, elbow disarticulation or above elbow,	
L0300	1	1	single wall socket, friction wrist, locking elbow, figure	
			of eight harness, fair lead cable control, USMC or	
			equal pylon, no cover, direct formed	
L6588	Y	Y	Preparatory, shoulder disarticulation or interscapular	
20300	-		thoracic, single wall plastic socket, shoulder joint,	
			locking elbow, friction wrist, chest strap, fair lead	
			cable control, USMC or equal pylon, no cover, molded	
			to patient model	
L6590	Y	Y	Preparatory, shoulder disarticulation or interscapular	
20070	-	-	thoracic, single wall socket, shoulder joint, locking	
			elbow, friction wrist, chest strap, fair lead cable	
			control, USMC or equal pylon, no cover, direct formed	
L6600		Y	Upper extremity additions, polycentric hinge, pair	
L6605		Y	Upper extremity additions, single pivot hinge, pair	
L6610		Y	Upper extremity additions, flexible metal hinge, pair	
L6615		Y	Upper extremity addition, disconnect locking wrist	
L0013		1	unit	
L6616		Y	Upper extremity addition, additional disconnect insert	
L0010		1	for locking wrist unit, each	
L6620		Y	Upper extremity addition, flexion-friction wrist unit	
L6621	Y	Y	Upper extremity prosthesis addition, flexion/extension	
L0021	1	1	wrist with or without friction, for use with external	
			powered terminal device	
L6623	Y	Y	Upper extremity addition, spring assisted rotational	
L0023	1	1	wrist unit with latch release	
L6625	Y	Y	Upper extremity addition, rotational wrist unit with	
L0023	1	1	cable lock	
L6628		Y		
L0028		1	Upper extremity addition, quick disconnect hook adapter, Otto Bock or equal	
L6629		Y	Upper extremity addition, quick disconnect lamination	
L0029		1	collar with coupling piece, Otto Bock or equal	
L6630		Y	Upper extremity addition, stainless steel, any wrist	
L6632		Y	Upper extremity addition, latex suspension sleeve,	
L0032		1	each	
L6635		v	Upper extremity addition, lift assist for elbow	
	V	Y	**	
L6637	Y		Upper extremity addition, nudge control elbow lock	
L6638	Y	Y	Upper extremity addition to prosthesis, electric locking	
T 6640	<b>T</b> 7	*7	feature, only for use with manually powered elbow	
L6640	Y	Y	Upper extremity additions, shoulder abduction joint,	
T cc.	<b>T</b> 7	*7	pair	
L6641	Y	Y	Upper extremity addition, excursion amplifier, pulley	
¥	**	**	type	
L6642	Y	Y	Upper extremity addition, excursion amplifier, lever	
			type	

	1		Trosuic	tic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L6645		Y	Upper extremity addition, shoulder flexion-abduction	
200.0		-	joint, each	
L6646	Y	Y	Upper extremity addition, shoulder joint,	
			multipositional locking, flexion, adjustable abduction	
			friction control, for use with body powered or external	
			powered system	
L6647		Y	Upper extremity addition, shoulder lock mechanism,	
			body powered actuator	
L6648	Y	Y	Upper extremity addition, shoulder lock mechanism,	
			external powered actuator	
L6650		Y	Upper extremity addition, shoulder universal joint,	
			each	
L6655		Y	Upper extremity addition, standard control cable, extra	
L6660		Y	Upper extremity addition, heavy duty control cable	
L6665		Y	Upper extremity addition, Teflon, or equal, cable	
			lining	
L6670		Y	Upper extremity addition, hook to hand, cable adapter	
L6672		Y	Upper extremity addition, harness, chest or shoulder,	
			saddle type	
L6675		Y	Upper extremity addition, harness, figure of eight type,	
			for single control	
L6676		Y	Upper extremity addition, harness, figure of eight type,	
			for dual control	
L6677	Y	Y	Upper extremity addition, harness, triple control,	
T 5500		**	simultaneous operation of terminal device and elbow.	
L6680		Y	Upper extremity addition, test socket, wrist	
1.6692		37	disarticulation or below elbow	
L6682		Y	Upper extremity addition, test socket, elbow disarticulation or above elbow	
L6684		Y	Upper extremity addition, test socket, shoulder	
L0064		1	disarticulation or interscapular thoracic	
L6686		Y	Upper extremity addition, suction socket	
L6687		Y	Upper extremity addition, frame type socket, below	
L0067		1	elbow or wrist disarticulation	
L6688		Y	Upper extremity addition, frame type socket, above	
20000		-	elbow or elbow disarticulation	
L6689	Y	Y	Upper extremity addition, frame type socket, shoulder	
			disarticulation	
L6690	Y	Y	Upper extremity addition, frame type socket,	
			interscapular-thoracic	
L6691	Y	Y	Upper extremity addition, removable insert, each	
L6692	Y	Y	Upper extremity addition, silicone gel insert or equal,	
			each	
L6693	Y	Y	Upper extremity addition, external locking elbow,	
			forearm counterbalance	
L6694	Y	Y	Addition to upper extremity prosthesis, below	
			elbow/above elbow, custom fabricated from existing	
			mold or prefabricated, socket insert, silicone gel,	
			elastomeric or equal, for use with locking mechanism.	

_			Trostne	tic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L6695		Y	Addition to upper extremity prosthesis, below	
			elbow/above elbow, custom fabricated from existing	
			mold or prefabricated, socket insert, silicone gel,	
			elastomeric or equal, not for use with locking	
7 110 1			mechanism	
L6696	Y	Y	Addition to upper extremity prosthesis, below	
			elbow/above elbow, custom fabricated socket insert for congenital or atypical traumatic amputee, silicone	
			gel, elastomeric or equal, for use with or without	
			locking mechanism, initial only (for other than initial,	
			use code L6694 or L6695)	
L6697	Y	Y	Addition to upper extremity prosthesis, below	
			elbow/above elbow, custom fabricated socket insert	
			for other than congenital or atypical traumatic	
			amputee, silicone gel, elastomeric or equal, for use	
			with ot without locking mechanism, initial only (for	
7 1 10 0			other than initial, use code L6694 or L6695)	
L6698	Y	Y	Addition to upper extremity prosthesis, below	
			elbow/above elbow, lock mechanism, excludes socket insert	
L6700		Y		
L6705		Y	Terminal device, hook, Dorrance or equal, model #3	
L6703		Y	Terminal device, hook, Dorrance or equal, model #5	
L6715		Y	Terminal device, hook, Dorrance or equal, model #5X	
L6/13		1	Terminal device, hook, Dorrance or equal, model #5XA	
L6720	Y	Y	Terminal device, hook, Dorrance or equal, model #6	
L6725	•	Y	Terminal device, hook, Dorrance or equal, model #7	
L6730		Y	Terminal device, hook, Dorrance or equal, model	
20750		1	#7LO	
L6735		Y	Terminal device, hook, Dorrance or equal, model #8	
L6740		Y	Terminal device, hook, Dorrance or equal, model #8X	
L6745		Y	Terminal device, hook, Dorrance or equal, model	
			#88X	
L6750		Y	Terminal device, hook, Dorrance or equal, model #10P	
L6755		Y	Terminal device, hook, Dorrance or equal, model	
			#10X	
L6765		Y	Terminal device, hook, Dorrance or equal, model #12P	
L6770		Y	Terminal device, hook, Dorrance or equal, model	
			#99X	
L6775		Y	Terminal device, hook, Dorrance or equal, model #555	
L6780		Y	Terminal device, hook, Dorrance or equal, model	
1.6700		*7	#SS555	
L6790	*7	Y	Terminal device, hook, Accu hook or equal	
L6795	Y	Y	Terminal device, hook, 2 load or equal	
L6800	Y	Y	Terminal device, hook, APRL VC or equal	
L6805	**	Y	Terminal device, modifier wrist flexion unit	
L6806	Y	Y	Terminal device, hook, TRS Grip, Grip III, VC, or	
1.6007	37	N/	equal	
L6807	Y	Y	Terminal device, hook, Grip I, Grip II, VC, or equal	
L6808	Y	Y	Terminal device, hook, TRS Adept, infant or child, VC, or equal	
			ve, or equal	

_			Trostne	tic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L6809	Y	Y	Terminal device, hook, TRS Super Sport, passive	
L6810	Y	Y	Terminal device, pincher tool, Otto Bock or equal	
L6825	Y	Y	Terminal device, hand, Dorrance, VO	
L6830	Y	Y	Terminal device, hand, APRL, VC	
L6835	Y	Y	Terminal device, hand, Sierra, VO	
L6840	Y	Y	Terminal device, hand, Becker Imperial	
L6845	Y	Y	Terminal device, hand, Becker Lock Grip	
L6850	Y	Y	Terminal device, hand, Becker Plylite	
L6855	Y	Y	Terminal device, hand, Robin-Aids, VO	
L6860	Y	Y	Terminal device, hand, Robin-Aids, VO  Terminal device, hand, Robin-Aids, VO soft	
L6865	Y	Y	Terminal device, hand, passive hand	
L6867	<u>Y</u>	Y	Terminal device, hand, Detroit Infant Hand	
L0807	1	1	(mechanical)	
L6868		Y	Terminal device, hand, passive infant hand, Steeper,	
LUGUG		1	Hosmer or equal	
L6870		Y	Terminal device, hand, child mitt	
L6872	Y	Y	Terminal device, hand, NYU child hand	
L6873	Y	Y	Terminal device, hand, mechanical infant hand,	
L0873	1	1	Steeper or equal	
L6875	Y	Y	Terminal device, hand, Bock, VC	
L6880	1	Y	Terminal device, hand, Bock, VC	
L6881	Y	Y	Automatic grasp feature, addition to upper limb	
L0001	1	1	prosthetic terminal device	
L6882	Y	Y	Microprocessor control feature, addition to upper limb	
L0862	1	1	prosthetic terminal device	
L6883	Y	Y	Replacement socket, below elbow/wrist	
L0003	1	1	disarticulation, molded to patient model, for use with	
			or without external power	
L6884	Y	Y	Replacement socket, above elbow disarticulation,	
			molded to patient model, for use with or without	
			external power	
L6885	Y	Y	Replacement socket, shoulder	
			disarticulation/interscapular thoracic, molded to	
			patient model, for use with or without external power	
L6890		Y	Terminal device, glove for above hands, production	
			glove	
L6895	Y	Y	Terminal device, glove for above hands, custom glove	
L6900	Y	Y	Hand restoration (casts, shading and measurements	
			included), partial hand, with glove, thumb or one	
			finger remaining	
L6905	Y	Y	Hand restoration (casts, shading and measurements	
			included), partial hand, with glove, multiple fingers	
T 6010	**	**	remaining	
L6910	Y	Y	Hand restoration (casts, shading and measurements	
			included), partial hand, with glove, no fingers	
I 6015	Y	Y	remaining  Hand restoration (sheding and measurements)	
L6915	1	ĭ	Hand restoration (shading and measurements included), replacement glove for above	
			meruded), repracement grove for above	

_			Trostne	ent and Ortholic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L6920	Y	Y	Wrist disarticulation, external power, self-suspended	
			inner socket, removable forearm shell, Otto Bock or	
			equal switch, cables, two batteries and one charger,	
			switch control of terminal device	
L6925	Y	Y	Wrist disarticulation, external power, self-suspended	
			inner socket, removable forearm shell, Otto Bock or	
			equal electrodes, cables, two batteries and one charger,	
			myoelectronic control of terminal device	
L6930	Y	Y	Below elbow, external power, self-suspended inner	
			socket, removable forearm shell, Otto Bock or equal	
			switch, cables, two batteries and one charger, switch	
1.6025	37	37	control of terminal device	
L6935	Y	Y	Below elbow, external power, self-suspended inner	
			socket, removable forearm shell, Otto Bock or equal	
			electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	
L6940	Y	Y	Elbow disarticulation, external power, molded inner	
L0940	1	1	socket, removable humeral shell, outside locking	
			hinges, forearm, Otto Bock or equal switch, cables,	
			two batteries and one charger, switch control of	
			terminal device	
L6945	Y	Y	Elbow disarticulation, external power, molded inner	
			socket, removable humeral shell, outside locking	
			hinges, forearm, Otto Bock or equal electrodes, cables,	
			two batteries and one charger, myoelectronic control	
			of terminal device	
L6950	Y	Y	Above elbow, external power, molded inner socket,	
			removable humeral shell, internal locking elbow,	
			forearm, Otto Bock or equal switch, cables, two	
			batteries and one charger, switch control of terminal	
7 10 7 7			device	
L6955	Y	Y	Above elbow, external power, molded inner socket,	
			removable humeral shell, internal locking elbow,	
			forearm, Otto Bock or equal, electrodes, cables, two batteries and one charger, myoelectronic control of	
			terminal device	
L6960	Y	Y	Shoulder disarticulation, external power, molded inner	
LUJUU	1	1	socket, removable shoulder shell, shoulder bulkhead,	
			humeral section, mechanical elbow, forearm, Otto	
			Bock or equal switch, cables, two batteries and one	
			charger, switch control of terminal device	
L6965	Y	Y	Shoulder disarticulation, external power, molded inner	
			socket, removable shoulder shell, shoulder bulkhead,	
			humeral section, mechanical elbow, forearm, Otto	
			Bock or equal electrodes, cables, two batteries and one	
			charger, myoelectronic control of terminal device	
L6970	Y	Y	Interscapular-thoracic, external power, molded inner	
			socket, removable shoulder shell, shoulder bulkhead,	
			humeral section, mechanical elbow, forearm, Otto	
			Bock or equal switch, cables, two batteries and one	
			charger, switch control of terminal device	

			1 T OSCINC	etic and Orthotic Devices
Procedure				Policy/
Code	PA	Lic	Description	Comments
L6975	Y	Y	Interscapular-thoracic, external power, molded inner	
			socket, removable shoulder shell, shoulder bulkhead,	
			humeral section, mechanical elbow, forearm, Otto	
			Bock or equal electrodes, cables, two batteries and one	
			charger, myoelectronic control of terminal device	
L7010	Y	Y	Electronic hand, Otto Bock, Steeper or equal, switch controlled	
L7015	Y	Y	Electronic hand, System Teknik, Variety Village or	
L/013	1	1	equal, switch controlled	
L7020	Y	Y	Electronic greifer, Otto Bock or equal, switch	
27020			controlled	
L7025	Y	Y	Electronic hand, Otto Bock or equal,	
2,025	-	•	myoelectronically controlled	
L7030	Y	Y	Electronic hand, System Teknik, Variety Village or	
		-	equal, myoelectronically controlled	
L7035	Y	Y	Electronic Greifer, Otto Bock or equal,	
	_	-	myoelectronically controlled	
L7040	Y	Y	Prehensile actuator, Hosmer or equal, switch	
			controlled	
L7045	Y	Y	Electronic hook, child, Michigan or equal, switch	
			controlled	
L7170	Y	Y	Electronic elbow, Hosmer or equal, switch controlled	
L7180	Y	Y	Electronic elbow, Boston, Utah or equal,	
2,100	-	•	myoelectronically controlled	
L7181	Y	Y	Electronic elbow, microprocessor simultaneous control	
_,_,			of elbow and terminal device	
L7185	Y	Y	Electronic elbow, adolescent, Variety Village or equal,	
_,_,			switch controlled	
L7186	Y	Y	Electronic elbow, child, Variety Village or equal,	
			switch controlled	
L7190	Y	Y	Electronic elbow, adolescent, Variety Village or equal,	
			myoelectronically controlled	
L7191	Y	Y	Electronic elbow, child, Variety Village or equal,	
			myoelectronically controlled	
L7260	Y	Y	Electronic wrist rotator, Otto Bock or equal	
L7261	Y	Y	Electronic wrist rotator, for Utah arm	
L7266	Y	Y	Servo control, Steeper or equal	
L7272	Y	Y	Analogue control, UNB or equal	
L7274	Y	Y	Proportional control, 6-12 volt, Liberty, Utah or equal	
L7360	Y	Y	Six volt battery, Otto Bock or equal, each	
L7362	Y	Y	Battery charger, six volt, Otto Bock or equal	
L7364	Y	Y	Twelve volt battery, Utah or equal, each	
L7366	Y	Y	Battery charger, twelve volt, Utah or equal	
L7367	Y	Y	Lithium ion battery, replacement	
L7368	Y	Y	Lithium ion battery charger	
L7308	Y	<u>Y</u>	Addition to upper extremity prosthesis, below	
L/400	1	1	elbow/wrist disarticulation, ultralight material	
			(titanium, carbon fiber or equal)	
L7401	Y	Y	Addition to upper extremity prosthesis, above elbow	
2,701	1	1	disarticulation, ultralight material (titanium, carbon	
			fiber or equal)	
			· · · · · · · · · · · · · · · · · · ·	

	Prostnetic and Orthotic Devices				
Procedure				Policy/	
Code	PA	Lic	Description	Comments	
L7402	Y	Y	Addition to upper extremity prosthesis, shoulder		
			disarticulation/interscapular thoracic, ultralight		
			material (titanium, carbon fiber or equal)		
L7403	Y	Y	Addition to upper extremity prosthesis, below		
			elbow/wrist disarticulation, acrylic material		
L7404	Y	Y	Addition to upper extremity prosthesis, above elbow		
			disarticulation, acrylic material		
L7405	Y	Y	Addition to upper extremity prosthesis, shoulder		
7 7 100			disarticulation/interscapular thoracic, acrylic material		
L7499	Y	Y	Upper extremity prosthesis, not otherwise specified		
L7500	Y	Y	Repair of prosthetic device, hourly rate		
L7510	Y	Y	Repair prosthetic device, repair or replace minor parts		
L7520	Y	Y	Repair of prosthetic device, labor component, per 15		
1.7.000	* 7	* 7	minutes		
L7600	Y	Y	Prosthetic donning sleeve, any material, each		
L7900		distrib	Vacuum erection system		
L8000		***	Breast prosthesis, mastectomy bra		
L8001		***	Breast prosthesis, mastectomy bra, with integrated	Not allowed with L8020 or	
1,0000		***	breast prosthesis form, unilateral	L8030	
L8002		***	Breast prosthesis, mastectomy bra, with integrated	Not allowed with L8020 or	
T 0010		***	breast prosthesis form, bilateral	L8030	
L8010		***	Breast prosthesis, mastectomy sleeve		
L8015		***	External breast prosthesis garment, with mastectomy form, post mastectomy		
L8020		***			
L8020		***	Breast prosthesis, mastectomy form  Breast prosthesis, silicone or equal		
L8035			Custom breast prosthesis, post mastectomy, molded to		
L8033			patient model		
L8039	Y		Breast prosthesis, not otherwise specified		
L8040	1		Nasal prosthesis, provided by a non-physician		
L8040			Midfacial prosthesis, provided by a non-physician		
L8041			Orbital prosthesis, provided by a non-physician		
L8042			Upper facial prosthesis, provided by a non-physician		
L8043			Hemi-facial prosthesis, provided by a non-physician		
L8044 L8045			Auricular prosthesis, provided by a non-physician		
L8045 L8046			Partial facial prosthesis, provided by a non-physician		
L8046 L8047			Nasal septal prosthesis, provided by a non-physician		
-			Unspecified maxillofacial prosthesis, by report,		
L8048			provided by a non-physician		
L8049			Repair or modification of maxillofacial prosthesis,		
L0049			labor component, 15 minute increments, provided by a		
			non-physician		
L8300		***	Truss, single with standard pad		
L8310		***	Truss, double with standard pads		
L8320		***	Truss, addition to standard pad, water pad		
L8330		***	Truss, addition to standard pad, scrotal pad		
L8400		Y	Prosthetic sheath, below knee, each		
L8410		Y	Prosthetic sheath, above knee, each		
L8415		Y	Prosthetic sheath, upper limb, each		
20110			we show, apper mile, each		

Procedure			1 10014	Policy/
Code	PA	Lic	Description	Comments
Coue	IA	Lic	Description	Comments
L8417		Y	Prosthetic sheath/sock, including a gel cushion layer,	
		1	below knee or above knee, each	
L8420		Y	Prosthetic sock, multiple ply, below knee, each	
L8430		Y	Prosthetic sock, multiple ply, above knee, each	
L8435		Y	Prosthetic sock, multiple ply, above knee, each	
L8440		Y	Prosthetic shrinker, below knee, each	
L8460		Y	Prosthetic shrinker, above knee, each	
L8465		Y	Prosthetic shrinker, upper limb, each	
L8470		Y	Prosthetic sock, single ply, fitting, below knee, each	
L8480		Y	Prosthetic sock, single ply, fitting, above knee, each	
L8485		Y	Prosthetic sock, single ply, fitting, upper limb, each	
L8499	Y	Y	Unlisted procedure for miscellaneous prosthetic	
L0499	1	1	services	
L8500			Artificial larynx, any type	
L8501			Tracheostomy speaking valve	
L8505			Artificial larynx replacement battery/accessory, any	
L0303			type	
L8507			Tracheo-esophageal voice prosthesis, patient inserted,	
20307			any type, each	
L8509			Tracheao-esophogeal voice prosthesis, inserted by a	
			licensed health care provider, any type	
L8510			Voice amplifier	
L8511			Insert for indwelling tracheoesophageal prosthesis,	
			with or without valve, replacement only, each	
L8512			Gelatin capsules or equivalent, for use with	1 unit = 10 capsules
			tracheoesophageal voice prosthesis, replacement only,	
			per 10	
L8513			Cleaning device used with tracheoesophageal voice	
			prosthesis, pipet, brush, or equal, replacement only,	
7.0514			each	
L8514			Tracheoesophageal puncture dilator, replacement only,	
1.0515			each	
L8515			Gelatin capsule, application device for use with	
L8600			tracheoesophageal voice prosthesis, each	
L8603			Implantable breast prosthesis, silicone or equal Injectable bulking agent, collagen implant, urinary	1 unit = 2.5 ml
L8003			tract, per 2.5 ml syringe, includes shipping and	1 unit = 2.3 ini
			necessary supplies	
L8606			Injectable bulking agent, synthetic implant, urinary	1 unit = 1 ml
20000			tract, 1 ml syringe, includes shipping and necessary	T unit
			supplies	
L8609			Artificial cornea	
L8610			Ocular Implant	
L8612			Aqueous shunt	
L8613			Ossicular implant	
L8614			Cochlear device/system	
L8615			Headset/headpiece for use with cochlear implant	
			device, replacement	

Prostnetic and Orthotic					
Procedure Code	PA	Lic	Description	Policy/ Comments	
L8616			Microphone for use with cochlear implant device, replacement		
L8617			Transmitting coil for use with cochlear implant device, replacement		
L8618			Transmitter cable for use with cochlear implant device, replacement		
L8619			Cochlear implant external speech processor, replacement		
L8621			Zinc air battery for use with cochlear implant device, replacement, each		
L8622			Alkaline battery for use with cochlear implant device, any size, replacement, each		
L8623			Lihium battery for use with cochlear implant device speech processor, other than ear level, replacement, each		
L8624			Lihium battery for use with cochlear implant device speech processor, ear level replacement, each		
L8630			Metacarpophalangeal joint implant		
L8631			Metacarpal phalangeal joint replacement, two or more pieces, metal(e.g., stainless steel or cobalt chrome), ceramic-like material (e.g., pyrocarbon), for surgical		
7.0.11			implantation (all sizes, includes entire system)		
L8641			Metatarsal joint implant		
L8642			Hallux implant		
L8658			Interphalangeal joint implant		
L8659			Interphalangeal finger joint replacement, two or more pieces, metal (e.g., stainless steel or cobalt chrome), ceramic-like material (e.g., pyrocarbon) for surgical implantation, any size		
L8670			Vascular graft material, synthetic, implant		
L8680			Implantable neurostimulator electrode, each		
L8681			Patient programmer (external) for use with implantable programmable neurostimulator pulse generator		
L8682			Implantable neurostimulator radiofrequency receiver		
L8683			Radiofrequency transmitter (external) for use with implantable neurostimulator radiofrequency receiver		
L8684			Radiofrequency transmitter (external) for use with implantable sacral root neurostimulator receiver for bowel and bladder management, replacement		
L8685			Implantable neurostimulator pulse generator, single array, rechargeable, includes extension		
L8686			Implantable neurostimulator pulse generator, single array, non-rechargeable, includes extension		
L8687			Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension		
L8688			Implantable neurostimulator pulse generator, dual array, non-rechargeable, includes extension		
L8689			External recharging system for implanted neurostimulator, replacement only		
L8699			Prosthetic implant, not otherwise specified		

Procedure				Policy/
Code	PA	Lic	Description	Comments
L9900			Orthotic and prosthetic supply, accessory, and/or service component of another HCPCS L code	
V2623			Prosthetic eye, plastic, custom	
V2624			Polishing/resurfacing of ocular prosthesis	
V2625			Enlargement of ocular prosthesis	
V2626			Reduction of ocular prosthesis	
V2627			Scleral cover shell	
V2628			Fabrication and fitting of ocular conformer	
V2629	Y		Prosthetic eye, other type	

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## **Provider Requirements**

## What is required from MAA's P&O devices providers? (Refer to WAC 388-543-1200 [1])

MAA requires a provider who supplies P&O devices and related supplies and services to an MAA client to meet all of the following. The provider must:

- Have a proper business license;
- Have appropriately trained qualified staff;
- Be certified, licensed, and/or bonded, if required, to perform the services billed to MAA. Out-of-state P&O providers must meet their state regulatory requirements; and
- Have an MAA core provider agreement.

# Who does MAA reimburse for providing P&O devices and related supplies and services to MAA clients?

(Refer to WAC 388-543-1200 [2])

MAA may reimburse qualified providers for P&O devices, repairs, and related supplies and services on a fee-for-service (FFS) basis as follows:

- Licensed P&O providers who are licensed by the Washington State Department of Health (DOH) in P&O. This does not apply to medical equipment dealers and pharmacies that do not require licensure to provide selected P&O;
- All HCPCS codes with a "\*\*\*" indicator in the licensure column may be provided by a supplier that has a DME or Pharmacy provider number as long as all other licensure requirements have been met.
- Physicians who provide medical equipment and supplies in the physician's office. MAA
  may pay separately for medical supplies, subject to the provisions in MAA's Physician'sRelated Services (RBRVS) fee schedule; and
- Out-of-state P&O providers who meet their state regulations.



**Note:** MAA terminates from Medicaid participation any provider who violates program regulations and policies, as described in WAC 388-502-0030. (WAC 388-543-1200 [3])

### What records must be kept? (Refer to WAC 388-502-0020)

### **Enrolled providers must:**

- Keep legible, accurate, and complete charts and records to justify the services provided to each client, including, but not limited to:
  - ✓ Patient's name and date of birth;
  - ✓ Dates of service(s);
  - ✓ Name and title of person performing the service, if other than the billing practitioner;
  - ✓ Chief complaint or reason for each visit;
  - ✓ Pertinent medical history;
  - ✓ Pertinent findings on examination;
  - ✓ Medications, equipment, and/or supplies prescribed or provided;
  - ✓ Description of treatment (when applicable);
  - ✓ Recommendations for additional treatments, procedures, or consultations;
  - ✓ X-rays, tests, and results;
  - ✓ Plan of treatment and/or care, and outcome;
  - ✓ Specific claims and payments received for services; and
  - ✓ Any specifically required forms for the provision of P&O devices.
- Assure charts are authenticated by the person who gave the order, provided the care, or performed the observation, examination, assessment, treatment or other service to which the entry pertains.
- Make charts and records available to DSHS, its contractors, and the US Department of Health and Human Services, upon their request, <u>for at least six years from the date of service</u> or more if required by federal or state law or regulation.

A provider may contact MAA with questions regarding its programs. However, MAA's response is based solely on the information provided to MAA's representative at the time of inquiry, and in no way exempts a provider from following the laws and rules that govern MAA's programs. (Refer to WAC 388-502-0020[2])

### Authorization

### What is prior authorization?

Prior authorization (PA) is MAA's approval for certain medical services, equipment, or supplies, before the services are provided to clients, as a precondition for provider reimbursement. **Expedited prior authorization (EPA) and limitation extensions (LE) are forms of prior authorization.** 

### Is Prior Authorization required? (Refer to WAC 388-543-1600)

**Yes!** The Medical Assistance Administration (MAA) requires prior authorization for certain purchases and repairs of medically necessary P&O devices and related supplies and services. Please refer to the PA column of the *Fee Schedule* (Section H) for items that require prior authorization

MAA bases its determination about which P&O devices and related supplies and services require PA or EPA on utilization criteria. MAA considers all of the following when establishing utilization criteria:

- High cost;
- Potential for utilization abuse;
- Narrow therapeutic indication; and
- Safety.

### How do I request prior authorization?

Providers must submit the request in writing to the Quality Utilization Section or call the authorization toll-free number at 1-800-292-8064. (See *Important Contacts* section.)

### **General Policies for Prior Authorization**

(Refer to WAC 388-543-1800)

• For PA requests, MAA requires the prescribing provider to furnish patient-specific justification for base equipment and each requested line item accessory or modification identified as a separate charge. MAA does not accept general standards of care or industry standards for generalized equipment as justification.

- When MAA receives an initial request for PA, the prescription(s) for those items or services cannot be older than three months from the date MAA receives the request.
- MAA requires certain information from providers to prior authorize the purchase of equipment. This information includes, but is not limited to, the following:
  - ✓ A detailed description of the item; and
  - ✓ Any modifications required, including the product or accessory number as shown in the manufacturer's catalog.
- MAA prior authorizes By Report (BR) items that require PA and are listed in the *Fee Schedule* (section H) only if medical necessity is established and the provider furnishes all of the following information to MAA:
  - ✓ A detailed description of the item or service to be provided;
  - ✓ The cost or charge for the item;
  - ✓ A copy of the manufacturer's invoice, price-list or catalog with the product description for the item being provided; and
  - ✓ A detailed explanation of how the requested item differs from an already existing code description.
- MAA does not reimburse for purchase or repair of medical equipment that duplicates equipment the client already owns. If the provider makes such a request, MAA requires the provider to submit a PA request and explain the following:
  - ✓ Why the existing equipment no longer meets the client's medical needs; or
  - ✓ Why the existing equipment could not be repaired or modified to meet those medical needs.
- A provider may resubmit a request for PA for an item or service that MAA has denied. MAA requires the provider to include new documentation that is relevant to the request.
- MAA prior authorizes extensive maintenance that the manufacturer recommends be performed by an authorized dealer. MAA requires the client to take responsibility for routine maintenance of a prosthetic or orthotic. If the client does not have the physical or mental ability to perform the task, MAA requires the client's caregiver to be responsible. [WAC 388-543-2600 (4)]



**Note:** Written requests for prior authorization must be submitted to MAA on a HCFA-1500 claim form with the date of service left blank and a copy of the prescription attached.

### What is a limitation extension?

A limitation extension is when MAA allows additional units of service for a client when the provider can verify that the additional units of service are medically necessary. Limitation extensions require prior authorization.

**Note:** Requests for limitation extensions must be appropriate to the client's eligibility and/or program limitations. Not all client eligibility groups cover all services.

### How do I request a limitation extension?

In cases where the provider feels that additional services are medically necessary for the client, the provider must request pre-approval from MAA in writing.

### The request must state the following in writing:

- 1. The name and PIC number of the client;
- 2. The provider's name, provider number and fax number;
- 3. Additional service(s) requested;
- 4. Copy of last prescription and date dispensed;
- 5. The primary diagnosis code and HCPCS code or state assigned code; and
- 6. Client-specific clinical justification for additional services.

### Send your request for a limitation extension to:

Division of Health Services Quality Support Quality Utilization Section Durable Medical Equipment/P&O Devices PO Box 45506 Olympia, WA 98504-5506 (800) 292-8064 (360) 586-5299 fax

### What is expedited prior authorization?

The expedited prior authorization process (EPA) is designed to eliminate the need for written and telephonic requests for prior authorization for selected P&O device procedure codes. MAA allows payment during a continuous 12-month period for this process.

To bill MAA for P&O devices that meet the EPA criteria on the following pages, the provider must create a 9-digit EPA number. The first 6 digits of the EPA number must be **870000**. The last 3 digits must be the code number of the product and documented medical condition that meets the EPA criteria. Enter the EPA number on the HCFA-1500 claim form in the *Authorization Number* field or in the *Authorization* field when billing electronically.

Example: The 9-digit EPA number for purchase of a foot insert, removable, formed to patient foot for a client that meets one of the EPA criteria would be **870000780** (870000 = first 6 digits, 780 = product and documented medical condition).

Providers are reminded that EPA numbers are only for those products listed on the EPA Criteria Coding List. EPA numbers are not valid for:

- P&O devices requiring prior authorization through the P&O Devices program;
- Products for which the documented medical condition does not meet <u>all</u> of the specified EPA criteria; or
- Over-limitation requests.

The written or telephonic request process for PA must be used when a situation does not meet the criteria for EPA for a selected P&O device procedure code. Providers must submit the request in writing to the Quality Utilization Section or call the authorization toll-free number at 1-800-292-8064. (See *Important Contacts* section.) (Refer to WAC 388-543-1900[3])

### **Expedited Prior Authorization Guidelines:**

- **A. Medical Justification (criteria)** All information must come from the client's prescribing physician or therapist, with an appropriately completed prescription. MAA does not accept information obtained from the client or from someone on behalf of the client (e.g. family).
- **B. Documentation** The billing provider **must keep** documentation of the criteria in the client's file. Upon request, a provider must provide documentation to MAA showing how the client's condition met the criteria for EPA. Keep documentation file for six (6) years. (Refer to WAC 388-543-1900[4])



**Note:** MAA may recoup any payment made to a provider under this section if the provider did not follow the expedited authorization process and criteria. Refer to WAC 388-502-0100. (WAC 388-543-1900[5])

### **EPA Criteria Coding List**

Code Criteria Code Criteria

#### **PROSTHETICS**

Procedure Code: L5683 & L5681

787 Addition to lower extremity, below knee/above knee, socket insert, suction suspension with or without locking mechanism.

Initial purchase of one (1) L5683 and L5681 per initial, lower extremity prosthesis (one to wash, one to wear) allowed per 12-month period if any of the following criteria are met:

- 1) Short residual limb;
- 2) Diabetic; or
- 3) History of skin problems/open sores on stump.

### **☞ NOTE:**

- 1) If the medical condition does not meet one of the above specified criteria, you must obtain prior authorization by submitting a request in writing to QUS (see *Important Contacts*) or by calling the authorization toll-free number at 1-800-292-8064.
- 2) This EPA is allowed only one time per client, per 12-month period. It is the provider's responsibility to determine whether the EPA has been used for the client within 12 months prior to the provider's proposed date of service.
- 3) EPA is for initial purchase only. It is not to be used for replacements of existing products.

### **ORTHOTICS**

**Procedure Code: L3030** 

780 Foot insert, removable, formed to patient foot.

One (1) pair allowed in a 12-month period if one of the following criteria is met:

- 1) Severe arthritis with pain;
- 2) Flat feet or pes planus with pain;
- 3) Valgus or varus deformity with pain;
- 4) Plantar fasciitis with pain; or
- 5) Pronation.

### **☞ NOTE:**

- 1) If the medical condition does not meet one of the above specified criteria, you must obtain prior authorization by submitting a request in writing to QUS (see *Important Contacts*) or by calling the authorization toll-free number at 1-800-292-8064.
- 2) This EPA is allowed only one time per client, per 12-month period. It is the provider's responsibility to determine whether the EPA has been used for the client within 12 months prior to the provider's proposed date of service.

#### Procedure Code: L3310 & L3320

781 Lift, elevation, heel & sole, per inch.

For a client with a leg length discrepancy, allowed for as many inches as required (must be at least one inch), on one shoe per 12-month period.

### **Procedure Code: L3334**

### 782 Lift, elevation, heel, per inch

Allowed for as many inches as required (has to be at least one inch), for a client with a leg length discrepancy, on one shoe per 12-month period.

### **NOTE** (for 3300l and L3334):

- 1) Lifts are not covered for less than one (1) inch.
- 2) Lifts are only allowed on one (1) pair of client shoes.
- 3) If the medical condition does not meet one of the above specified criteria, you must obtain prior authorization by submitting a request in writing to QUS (see *Important Contacts*) or by calling the authorization toll-free number at 1-800-292-8064.
- 4) This EPA is allowed only one time per client, per 12-month period. It is the provider's responsibility to determine whether the EPA has been used for the client within 12 months prior to the provider's proposed date of service.

### **Procedure Code: L3000**

# 784 Foot insert, removable, molded to patient model, "UCB" type, Berkeley Shell, each

Purchase of one (1) pair per 12-month period for a client 16 years of age or younger allowed if any of the following criteria are met:

- 1) Required to prevent or correct pronation;
- 2) Required to promote proper foot alignment due to pronation; or
- 3) For ankle stability as required due to an existing medical condition such as hypotonia, Cerebral Palsy, etc.

#### **ℙ NOTE:**

- 1) If the medical condition does not meet one of the above specified criteria, you must obtain prior authorization by submitting a request in writing to QUS (see *Important Contacts*) or by calling the authorization toll-free number at 1-800-292-8064.
- 2) This EPA is allowed only one time per client, per 12-month period. It is the provider's responsibility to determine whether the EPA has been used for the client within 12 months prior to the provider's proposed date of service.
- 3) If the client only medically requires one orthotic, right or left, prior authorization must be obtained.

### **Procedure Code: L3215 or L3219**

### 785 Orthopedic footwear, woman's or man's shoes, oxford.

Purchase of one (1) pair per 12-month period allowed if any of the following criteria are met:

- 1) When one or both shoes are attached to a brace:
- 2) When one or both shoes are required to accommodate a brace with the exception of L3030 foot inserts;
- 3) To accommodate a partial foot prosthesis; or
- 4) To accommodate club foot.

### **MOTE:**

- 1) MAA does not allow orthopedic footwear for the following reasons:
  - a) To accommodate L3030 orthotics:
  - b) Bunions;
  - c) Hammer toes;
  - d) Size difference (mismatched shoes); or
  - e) Abnormal sized foot.

### Continued on next page

- 2) MAA only allows the following manufacturers of Orthopedic:
  - a) Acor;
  - b) Alden Shoe Company;
  - c) Jerry Miller;
  - d) Markell;
  - e) P.W. Minor;
  - f) Walkin-Comfort; and
  - g) Hanger.
- 3) If the medical condition does not meet one of the above specified criteria, you must obtain prior authorization by submitting a request in writing to QUS (see *Important Contacts*) or by calling the authorization toll-free number at 1-800-292-8064.
- 4) EPA is allowed only one time per client, per 12-month period. It is the provider's responsibility to determine whether the client has already used all EPA in the period allowed under the EPA criteria.

#### **Procedure Code: L1945**

786 AFO, molded to patient model, plastic, rigid anterior tibial section (floor reaction).

Purchase of one per limb allowed per 12-month period if <u>all</u> of the following criteria are met:

- 1) Client is 16 years old or younger; and
- 2) Required due to a medical condition causing crouched gait.

#### **☞ NOTE:**

- 1) If the medical condition does not meet one of the above specified criteria, you must obtain prior authorization by submitting a request in writing to QUS (see *Important Contacts*) or by calling the authorization toll-free number at 1-800-292-8064.
- 2) EPA is allowed only one time per client, per 12-month period. It is the provider's responsibility to determine whether the client has already used all EPA in the period allowed under the EPA criteria.

**Prosthetic and Orthotic Devices** 

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### Reimbursement

# General Reimbursement for P&O Devices and Related Supplies and Services (Refer to WAC 388-543-1400 and 388-543-2700)

- MAA reimburses a qualified provider who serves a client who is not enrolled in a department-contracted managed care plan only when all of the following apply:
  - ✓ The provider meets all of the conditions in WAC 388-502-0100; and
  - ✓ MAA does not include the item/service for which the provider is requesting reimbursement in other reimbursement rate methodologies. Other methodologies include, but are not limited to, the following:
    - ➤ Hospice providers' per diem reimbursement;
    - Hospital's diagnosis related group (DRG) reimbursement;
    - Managed care plans' capitation rate; and
    - Nursing facilities' per diem rate.
- A provider must not bill MAA for the purchase of equipment supplied to the provider at no cost by suppliers/manufacturers.
- Reimbursement for P&O devices is limited to HCPCS/National Codes with the same level of coverage as Medicare.
- MAA may adopt policies, procedure codes, and/or rates that are different than those set by Medicare, if MAA determines that such actions are in the best interest of its clients.
- MAA may pay for medical services rendered to a client only when MAA is the payer of last resort.
- MAA's maximum payment for medical equipment and supplies is the lesser of either of the following:
  - ✓ Provider's usual and customary charge; or
  - ✓ Established rates, unless the client is eligible for both Medicare and Medicaid (see *Billing* section).

- MAA determines reimbursement for P&O devices according to a set fee schedule (see section H). MAA considers Medicare's current fee schedule when determining maximum allowable fees. For By Report (BR) codes, MAA reimburses 85% of the agreed upon fee.
- MAA sets maximum allowable fees for P&O devices and related supplies and services using available published information, such as:
  - ✓ Commercial databases for price comparisons;
  - ✓ Manufacturers' catalogs;
  - ✓ Medicare fee schedules; and
  - ✓ Wholesale prices.
- MAA evaluates and updates the maximum allowable fees for P&O devices at least once per year, independent of scheduled legislatively authorized vendor rate increases. Rates remain effective until the next rate change.

#### **Specific Reimbursement for P&O Devices**

(Refer to WAC 388-543-2700)

- MAA's reimbursement for a P&O device includes the cost of any necessary molds.
- MAA's hospital reimbursement rate includes any P&O devices required for surgery and/or placed during the hospital stay.
- Reimbursement for gender dysphoria surgery includes payment for all related prosthetics and supplies.

### **Purchased P&O Devices and Related Supplies**

(Refer to WAC 388-543-1500)

- P&O devices and related supplies that MAA purchases for a client are the client's property. MAA reimbursement for covered P&O devices and related supplies includes all of the following:
  - ✓ Any adjustments or modifications to the equipment that are required within three months of the date of delivery. This does not apply to adjustments required because of changes in the client's medical condition;
  - ✓ Fitting and set-up; and
  - ✓ Instruction to the client or client's caregiver in the appropriate use of the equipment, device, and/or supplies.

- MAA requires a provider to furnish to MAA clients only new equipment that includes full manufacturer and dealer warranties.
- MAA charges the dispensing provider for any costs it incurs to have another provider repair equipment if all of the following apply:
  - ✓ The dispensing provider is unwilling or unable to fulfill the warranty; and
  - ✓ The client still needs the equipment.
- MAA rescinds purchase orders for the following reasons:
  - ✓ If the equipment was not delivered to the client before the client:
    - > Dies;
    - Loses medical eligibility;
    - **>** Becomes covered by a hospice agency; or
    - Becomes covered by an MAA managed care plan.
  - A provider may incur extra costs for customized equipment that may not be easily resold. In these cases, for purchase orders rescinded per the stipulations listed above, MAA may pay the provider an amount it considers appropriate to help defray these extra costs. MAA requires the provider to submit justification sufficient to support such a claim.
  - ✓ A client may become a managed care plan client before MAA completes the purchase of prescribed medical equipment. If this occurs:
    - MAA rescinds the purchase order until the managed care primary care provider (PCP) evaluates the client; then
    - MAA requires the PCP to write a new prescription if the PCP determines the equipment is still medically necessary (see *Definitions* section); then
    - The managed care plan's applicable reimbursement policies apply to the purchase or rental of the equipment.



**Note:** P&O devices placed during an inpatient hospital stay **are** included in the hospital reimbursement rate. MAA does **not** reimburse separately under these circumstances

**Prosthetic and Orthotic Devices** 

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The Prosthetic and Orthotic Devices Fee Schedule (previously found on pages G.1-G.62) is now located in the appendix. To view or download the Fee Schedule, click Appendix.

#### **HRSA's Fee Schedules**

You may access HRSA's fee schedules at: <a href="http://maa.dshs.wa.gov">http://maa.dshs.wa.gov</a>. Click **Billing**Instructions/Numbered Memoranda and accept the AMA copyright agreement. Then click on Fee Schedules. For subsequent visits, you may access the fee schedules at:

http://maa.dshs.wa.gov/RBRVS/Index.html

**Prosthetic and Orthotic Devices** 

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### **Billing**

#### What is the time limit for billing? [Refer to WAC 388-502-0150]

- MAA requires providers to submit an initial claim, be assigned an internal control number (ICN), and adjust all claims in a timely manner. MAA has two timeliness standards: 1) for initial claims; and 2) for resubmitted claims.
- The provider must submit claims as described in MAA's billing instructions.
- MAA requires providers to obtain an ICN for an initial claim within 365 days from any
  of the following:
  - ✓ The date the provider furnishes the service to the eligible client;
  - ✓ The date a final fair hearing decision is entered that impacts the particular claim;
  - ✓ The date a court orders MAA to cover the services; or
  - ✓ The date DSHS certifies a client eligible under delayed¹ certification criteria.
- MAA may grant exceptions to the 365 billing day time limit for **initial claims** when billing delays are caused by either of the following:
  - ✓ DSHS certification of a client for a retroactive<sup>2</sup> period; or
  - ✓ The provider proves to MAA's satisfaction that there are other extenuating circumstances.

Eligibility Established After Date of Service but Within the Same Month - If the client becomes eligible for a covered service that has already been provided because the client applied to the department for medical services later in the same month the service was provided (and is made eligible from the first day of the month), the provider must not bill, demand, collect, or accept payment from the client or anyone acting on the client's behalf for the service; and must promptly refund the total payment received from the client or anyone acting on the client's behalf and then bill MAA for the service.

Delayed Certification - According to WAC 388-500-0005, delayed certification means department approval of a person's eligibility for a covered service made after the established application processing time limits. If, due to delayed certification, the client becomes eligible for a covered service that has already been provided, the provider must not bill, demand, collect, or accept payment from the client or anyone on the client's behalf for the service; and must promptly refund the total payment received from the client or anyone acting on the client's behalf and then bill MAA for the service.

Retroactive Certification - According to WAC 388-500-0005, retroactive period means the three calendar months before the month of application (month in which client applied). If, due to retroactive certification, the client becomes eligible for a covered service that has already been provided, the provider must not bill, demand, collect, or accept payment from the client or anyone acting on the client's behalf for any unpaid charges for the service; and may refund any payment already received from the client or anyone acting on the client's behalf, and after refunding the payment, the provider may bill MAA for the service.

• Providers may **resubmit, modify, or adjust** any timely initial claim, <u>except prescription</u> drug claims, for a period of 36 months from the date of service. Prescription drug claims must be resubmitted, modified, or adjusted within 15 months from the date of service.



**Note:** MAA does not accept any claim for resubmission, modification, or adjustment after the allotted time period listed above.

- The allotted time periods do not apply to overpayments that the provider must refund to DSHS. After the allotted time periods, a provider may not refund overpayments to MAA by claim adjustment. The provider must refund overpayments to MAA by a negotiable financial instrument such as a bank check.
- The provider, or any agent of the provider, must not bill a client or a client's estate when:
  - ✓ The provider fails to meet these listed requirements; and
  - ✓ MAA does not pay the claim.

#### What fee should I bill MAA for eligible clients?

Bill MAA your usual and customary fee.



**Exception:** If billing Medicare Part B crossover claims, bill the amount

submitted to Medicare.

# How do I bill for services provided to Primary Care Case Management (PCCM) clients?

When billing for services provided to PCCM clients:

- Enter the referring physician or PCCM name in field 17 on the HCFA-1500 claim form; and
- Enter the seven-digit, MAA-assigned identification number of the PCCM who referred the client for the service(s). If the client is enrolled with a PCCM and the PCCM referral number is not in field 17a when you bill MAA, the claim will be denied.

### How do I bill for clients who are eligible for Medicare and Medical Assistance?

If a client is eligible for both Medicare and Medical Assistance (otherwise known as "dualeligible"), you must <u>first</u> submit a claim to Medicare and accept assignment within Medicare's time limitations. MAA may make an additional payment after Medicare reimburses you.

- If Medicare pays the claim, the provider must bill MAA within six months of the date Medicare processes the claim.
- If Medicare denies payment of the claim, MAA requires the provider to meet MAA's initial 365-day requirement for initial claim (see page I.1).
- Codes billed to MAA must match codes billed to Medicare when billed as a Medicare Part B crossover claim.

#### **Medicare Part B**

Benefits covered under Part B include: **Physician, outpatient hospital services, home health, durable medical equipment, and other medical services and supplies** not covered under Part A.

When the words "This information is being sent to either a private insurer or Medicaid fiscal agent," appear on your Medicare remittance notice, it means that your claim has been forwarded to MAA or a private insurer for deductible and/or coinsurance processing.

If you have received a payment or denial from Medicare, but it does not appear on your MAA Remittance Advice and Status Report (RA) within 45 days from Medicare's statement date, you should bill MAA directly.

- If Medicare has made payment, and there is a balance due from MAA, you must submit an HCFA-1500 claim form (with the "XO" indicator in field 19). Bill only those lines Medicare paid. Do not submit paid lines with denied lines. This could cause a delay in payment or a denial.
- If Medicare denies services, but MAA covers them, you must bill on a HCFA-1500 claim form (without the "XO" indicator in field 19). Bill only those lines Medicare denied. Do not submit denied lines with paid lines. This could cause a delay in payment or a denial.
- If Medicare denies a service that requires prior authorization by MAA, MAA will waive the prior authorization requirement but will still require authorization. Authorization or denial of your request will be based upon medical necessity.

#### Note:

- ✓ Medicare/Medical Assistance billing claims must be received by MAA within six (6) months of the Medicare EOMB paid date.
- ✓ A Medicare Remittance Notice or EOMB must be attached to each claim.

#### Payment Methodology - Part B

- MMIS compares MAA's allowed amount to Medicare's allowed amount and selects the lesser of the two. (If there is no MAA allowed amount, we use Medicare's allowed amount.)
- Medicare's payment is deducted from the amount selected above.
- If there is *no* balance due, the claim is denied because Medicare's payment exceeds MAA's allowable.
- If there *is* a balance due, payment is made towards the deductible and/or coinsurance up to MAA's maximum allowable.

MAA cannot make direct payments to clients to cover the deductible and/or coinsurance amount of Part B Medicare. MAA *can* pay these costs to the provider on behalf of the client when:

- 1) The provider <u>accepts</u> assignment; and
- 2) The total combined reimbursement to the provider from Medicare and Medicaid does not exceed Medicare or Medicaid's allowed amount, whichever is less.

#### **Third-Party Liability**

You must bill the insurance carrier(s) indicated on the client's Medical Identification card. An insurance carrier's time limit for claim submissions may be different from MAA's. It is your responsibility to meet the insurance carrier's requirements relating to billing time limits, as well as MAA's, prior to any payment by MAA.

You must meet MAA's 365-day billing time limit even if you haven't received notification of action from the insurance carrier. If your claim is denied due to any existing third-party liability, refer to the corresponding MAA Remittance Advice and Status Report (RA) for insurance information appropriate for the date of service.

If you receive an insurance payment and the carrier pays you less than the maximum amount allowed by MAA, or if you have reason to believe that MAA may make an additional payment:

- Submit a completed claim form to MAA;
- Attach the insurance carrier's statement or EOB;
- If rebilling, also attach a copy of the MAA RA showing the previous denial; or
- If you are rebilling electronically, list the claim number (ICN) of the previous denial in the *Comments* field of the Electronic Media Claim (EMC).

Third-party carrier codes are available on MAA's website at <a href="http://maa.dshs.wa.gov">http://maa.dshs.wa.gov</a> or by calling the Coordination of Benefits Section at 1-800-562-6136.

**Prosthetic and Orthotic Devices** 

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# How to Complete the HCFA-1500 Claim Form

The HCFA-1500 (U2) (12-90) (Health Insurance Claim Form) is a universal claim form used by many agencies nationwide; a number of the fields on the form do not apply when billing the Medical Assistance Administration (MAA). Some field titles may not reflect their usage for this claim type. The numbered boxes on the claim form are referred to as fields.

# **Important!**General Guidelines:

• Use only the original preprinted red and white HCFA-1500 claim forms (version 12/90 or later, preferably on 20# paper). This form is designed specifically for optical character recognition (OCR) systems. The scanner <u>cannot read</u> black and white (copied, carbon, or laser-printer generated) HCFA-1500 claim forms.

If you need preprinted red and white HCFA-1500 claim forms, call 1-800-562-6188.

- **Do not use red ink pens, highlighters, "post-it notes," or stickers** anywhere on the claim form or backup documentation. The red ink and/or highlighter will not be picked up in the scanning process. Vital data will not be recognized. Do not write or use stamps or stickers that say, "REBILL," "TRACER," or "SECOND SUBMISSION" on claim form.
- Use standard typewritten fonts that are 10 c.p.i (characters per inch).

  Do not mix character fonts on the same claim form. Do not use italics or script.
- Use upper case (capital letters) for all alpha characters.
- Use black printer ribbon, ink-jet, or laser printer cartridges.
- Ensure all the claim information is entirely contained within the proper field on the claim form and on the same horizontal plane. Misaligned data will delay processing and may even be missed.
- Place only six detail lines on each claim form. MAA does not accept "continued" claim forms. If more than six detail lines are needed, use additional claim forms.
- Show the total amount for each claim form separately. Do not indicate the entire total (for all claims) on the last claim form; total each claim form.

#### Field Description/Instructions

- 1a. <u>Insured's I.D. No.</u>: Required. Enter the MAA Patient (client) Identification Code (PIC). This information is obtained from the client's current monthly Medical Identification card and consists of the client's:
  - a) First and middle initials (a dash [-] *must* be used if the middle initial is not available).
  - b) Six-digit birthdate, consisting of *numerals only* (MMDDYY).
  - c) First five letters of the last name. If there are fewer than five letters in the last name, leave spaces for the remainder <u>before</u> adding the tie breaker.
  - d) An alpha or numeric character (tie breaker).

#### For example:

- 1. Mary C. Johnson's PIC looks like this: MC010667JOHNSB.
- 2. John Lee's PIC needs two spaces to make up the last name, does not have a middle initial and looks like this: J-100257LEE B.
- 3. A PIC for Mary C. Johnson's newborn baby would look like this: MC010667JOHNSB and would show a **B** indicator in *field* 19.
- 2. <u>Patient's Name</u>: Required. Enter the last name, first name, and middle initial of the MAA client (the receiver of the services for which you are billing).
- **3. Patient's Birthdate**: Required. Enter the birthdate of the MAA client.

- 4. <u>Insured's Name (Last Name, First Name, Middle Initial)</u>: When applicable. If the client has health insurance through employment or another source (e.g., private insurance, Federal Health Insurance Benefits, CHAMPUS, or CHAMPVA), list the name of the insured here. Enter the name of the insured except when the insured and the client are the same then the word *Same* may be entered.
- 5. <u>Patient's Address</u>: Required. Enter the address of the MAA client who has received the services you are billing for (the person whose name is in *field* 2.)
- 9. Other Insured's Name: Secondary insurance. When applicable, enter the last name, first name, and middle initial of the insured. If the client has insurance secondary to the insurance listed in *field 11*, enter it here.
- **9a**. Enter the other insured's policy or group number *and* his/her Social Security Number.
- **9b** Enter the other insured's date of birth.
- **9c**. Enter the other insured's employer's name or school name.
- **9d.** Enter the insurance plan name or the program name (e.g., the insured's health maintenance organization, private supplementary insurance).

**Please note:** DSHS, Welfare, Provider Services, Healthy Kids, First Steps, and Medicare, etc., are <u>inappropriate</u> entries for this field.

- 10. <u>Is Patient's Condition Related To</u>:
  Required. Check *yes* or *no* to indicate whether employment, auto accident or other accident involvement applies to one or more of the services described in *field 24*. *Indicate the name of the coverage source in field 10d* (L&I, name of insurance company, etc.).
- 11. Insured's Policy Group or FECA
  (Federal Employees Compensation
  Act) Number: Primary insurance.
  When applicable. This information
  applies to the insured person listed in
  field 4. Enter the insured's policy
  and/or group number and his/her social
  security number. The data in this field
  will indicate that the client has other
  insurance coverage and MAA pays as
  payor of last resort.
- **11a.** <u>Insured's Date of Birth</u>: Primary insurance. When applicable, enter the insured's birthdate, if different from *field 3*.
- 11b. Employer's Name or School Name: Primary insurance. When applicable, enter the insured's employer's name or school name.
- 11c. Insurance Plan Name or Program
  Name: Primary insurance. When applicable, show the insurance plan or program name to identify the primary insurance involved. (Note: This may or may not be associated with a group plan.)

- 11d. Is There Another Health Benefit Plan?: Required if the client has secondary insurance. Indicate *yes* or *no*. If yes, you should have completed *fields 9a.-d*. If the client has insurance, and even if you know the insurance will not cover the service you are billing, you must check *yes*. If 11d. is left blank, the claim may be
- 17. Name of Referring Physician or Other Source: When applicable, enter the referring physician or Primary Care Case Manager name.

processed and denied in error.

- When applicable, 1) enter the sevendigit, MAA-assigned identification number of the provider who *referred or ordered* the medical service; OR 2) when the Primary Care Case Manager (PCCM) referred the service, enter his/her seven-digit identification number here. If the client is enrolled in a PCCM plan and the PCCM referral number is <u>not</u> in this field when you bill MAA, the claim will be denied.
- 19. Reserved For Local Use: When applicable, enter indicator B to indicate Baby on Parent's PIC. Please specify twin A or B, triplet A, B, or C here.
- 21. <u>Diagnosis or Nature of Illness or Injury</u>: When applicable, enter the appropriate diagnosis code(s) in areas 1, 2, 3, and 4. A valid ICD-9-CM code will be required. MAA no longer allows the use of an unspecified/dummy diagnosis code such as V58.9.

- 22. <u>Medicaid Resubmission</u>: When applicable. If the billing is resubmitted beyond the 365-day billing time limit, you must enter the ICN to verify that your claim was originally submitted within the time limit. (The ICN number is the *claim number* listed on the Remittance and Status Report.)
- When applicable. If the service or equipment you are billing for requires authorization, enter the nine-digit number assigned to you. <u>Use only one</u> authorization number per claim.
- 24. Enter only one (1) procedure code per detail line (fields 24A 24K). If you need to bill more than six (6) lines per claim, please use an additional HCFA-1500 claim form.

MAA does not accept "continued" claim forms. Each claim form must be totaled separately.

24A. <u>Date(s) of Service</u>: Required. Enter the "from" and "to" dates using all six digits for each date. Enter the month, day, and year of service numerically (e.g., November 4, 2001 = 110402). **Do not use slashes, dashes, or hyphens to separate month, day, year.** 

**24B.** Place of Service: Required. These are the only appropriate code(s) for this billing instruction:

#### **Code Number To Be Used For**

12	Home
13	Assisted Living
	Facility
31	Nursing Facility
32	Skilled Nursing
	Facility
99	Other place of service

**24C.** Type of Service: Not Required.

- 24D. Procedures, Services or Supplies
  HCPCS: Required. Enter the
  appropriate Centers for Medicare and
  Medicaid (CMS) (formerly known as
  HCFA) Common Procedure Coding
  System (HCPCS) or state-unique
  procedure code for the services being
  billed. MODIFIER: When
  appropriate enter a modifier.
- 24E. <u>Diagnosis Code</u>: Required. Enter the ICD-9-CM diagnosis code related to the procedure or service being billed (for each item listed in 24D). A diagnosis code is required for each service or line billed. Enter the code exactly as shown in ICD-9-CM. A valid ICD-9-CM code is required. MAA no longer allows the use of an unspecified/dummy diagnosis code such as V58.9.

- 24F. <u>\$ Charges</u>: Required. Enter your usual and customary charge for the service performed. If more than one unit is being billed, the charge shown must be for the total of the units billed. Do not include dollar signs or decimals in this field. Do not add sales tax. Sales tax is automatically calculated by the system and included with your remittance amount.
- **24G.** <u>Days or Units</u>: Required. Enter the total number of days or units (up to 999) for each line. These figures must be whole units.
- 25. <u>Federal Tax I.D. Number</u>: Leave this field blank.
- 26. Your Patient's Account No.: Not required. Enter an alphanumeric ID number, i.e., a medical record number or patient account number. This number will be printed on your Remittance Advice and Status Report (RA) under the heading Patient Account Number.
- **Total Charge**: Required. Enter the sum of your charges. Do not use dollar signs or decimals in this field.
  - MAA does not accept "continued" claim forms. Each claim form must be totaled separately.
- 29. Amount Paid: If you receive an insurance payment or client-paid amount, show the amount here, and attach a copy of the insurance EOB. If payment is received from source(s) other than insurance, specify the source in *field 10d*. Do not use dollar signs or decimals in this field or put Medicare payment here.

- **Balance Due**: Required. Enter balance due. Enter total charges minus any amount(s) in *field 29*. Do not use dollar signs or decimals in this field.
- 33. Physician's, Supplier's Billing
  Name, Address, Zip Code and
  Phone #: Required. Put the Name,
  Address, and Phone # on all claim
  forms.
  - **P.I.N. #:** Required. Enter the individual provider number assigned to you by MAA.

### Common Questions Regarding Medicare Part B/ Medicaid Crossover Claims

#### Q: Why do I have to mark "XO" in black ink in box 19 on crossover claim?

A: The "XO" allows our mailroom staff to identify crossover claims easily, ensuring accurate processing for payment. Use black ink for the "XO" in box 19 on crossover claims.

#### Q: What fields do I use for HCFA-1500 Medicare information?

<b>A:</b>	In Field:	Please Enter:
	19	an "XO"
	24K	Medicare's allowed charges
	29	Medicare's total deductible
	30	Medicare's total payment
	32	Medicare's EOMB process date, and the third-party
		liability amount

#### Q: When I bill Medicare denied lines to MAA, why is the claim denied?

**A:** Your bill is not a crossover when Medicare denies your claim or if you are billing for Medicare-denied lines. The Medicare EOMB must be attached to the claim. Do not indicate "XO."

#### Q: How do my claims reach Medicaid after I've sent them to Medicare?

A: After Medicare has processed your claim, and if Medicare has allowed the services, in most cases Medicare will forward the claim to MAA for any supplemental Medicaid payment. When the remarks code is, "MA07-The claim information has also been forwarded to Medicaid for review," it means that your claim has been forwarded to MAA.

#### Q: What if my claim(s) does not appear on the RA?

**A:** If **Medicare has paid** and the Medicare crossover claim does not appear on the MAA Remittance Advice and Status Report (RA) within 45 days of the Medicare statement date, you should bill MAA the *paid lines* on the HCFA-1500 claim form **with** an "XO" in box 19.

If **Medicare denies** a service, bill MAA the <u>denied lines</u>, using the HCFA-1500 claim form **without** an "XO" on the claim.

**REMEMBER!** Attach a copy of Medicare's EOMB.

**REMEMBER!** You must submit your claim to MAA within six months of the Medicare statement date if Medicare has **paid** or 365 days from date of service if Medicare has **denied**.



**Note:** Claims billed to MAA with payment by Medicare must be submitted with the same procedure code used to bill Medicare.

### How to Complete the HCFA-1500 Claim Form for Medicare Part B/Medicaid Crossovers

The HCFA-1500 (U2) (12-90) (Health Insurance Claim Form) is a universal claim form used by many agencies nationwide; a number of the fields on the form do not apply when billing the Medical Assistance Administration (MAA). Some field titles may not reflect their usage for this claim type. The numbered boxes on the claim form are referred to as fields.



#### **General Guidelines:**

• Use only the original preprinted red and white HCFA-1500 claim forms (version 12/90 or later, preferably on 20# paper). This form is designed specifically for optical character recognition (OCR) systems. The scanner <u>cannot read</u> black and white (copied, carbon, or laser-printer generated) HCFA-1500 claim forms.

If you need preprinted red and white HCFA-1500 claim forms, call 1-800-562-6188.

- **Do not use red ink pens, highlighters, "post-it notes," or stickers** anywhere on the claim form or backup documentation. The red ink and/or highlighter will not be picked up in the scanning process. Vital data will not be recognized. Do not write or use stamps or stickers that say, "REBILL," "TRACER," or "SECOND SUBMISSION" on claim form.
- Use standard typewritten fonts that are 10 c.p.i (characters per inch).

  Do not mix character fonts on the same claim form. Do not use italics or script.
- Use upper case (capital letters) for all alpha characters.
- Use black printer ribbon, ink-jet, or laser printer cartridges.
- Ensure all the claim information is entirely contained within the proper field on the claim form and on the same horizontal plane. Misaligned data will delay processing and may even be missed.
- Place only six detail lines on each claim form. MAA does not accept "continued" claim forms. If more than six detail lines are needed, use additional claim forms.
- Show the total amount for each claim form separately. Do not indicate the entire total (for all claims) on the last claim form; total each claim form.

The HCFA-1500 claim form, used for Medicare/Medicaid Benefits Coordination, <u>cannot</u> be billed electronically.

#### FIELD DESCRIPTION

- 1a. <u>Insured's I.D. No.</u>: Required. Enter the MAA Patient Identification Code (PIC). This information is obtained from the client's current monthly Medical Identification card and consists of the client's:
  - First and middle initials (a dash
     [-] must be used if the middle initial is not available).
  - Six-digit birthdate, consisting of *numerals only* (MMDDYY).
  - First five letters of the last name.
     If there are fewer than five letters in the last name, leave spaces for the remainder <u>before</u> adding the tiebreaker.
  - An alpha or numeric character (tiebreaker).

#### For example:

- ✓ Mary C. Johnson's PIC looks like this: MC010633JOHNSB.
- ✓ John Lee's PIC needs two spaces to make up the last name, does not have a middle initial and looks like this: J-100226LEE B
- 2. <u>Patient's Name</u>: Required. Enter the last name, first name, and middle initial of the MAA client (the receiver of the services for which you are billing).

- 3. <u>Patient's Birthdate</u>: Required. Enter the birthdate of the MAA client.
- 4. Insured's Name (Last Name, First Name, Middle Initial): When applicable. If the client has health insurance through employment or another source (e.g., private insurance, Federal Health Insurance Benefits, CHAMPUS, or CHAMPVA), list the name of the insured here. Enter the name of the insured except when the insured and the client are the same then the word *Same* may be entered.
- 5. <u>Patient's Address</u>: Required. Enter the address of the MAA client who has received the services you are billing for (the person whose name is in *field 2*).
- 9. Other Insured's Name: Secondary insurance. When applicable, enter the last name, first name, and middle initial of the insured. If the client has insurance secondary to the insurance listed in *field 11*, enter it here.
- **9a.** Enter the other insured's policy or group number *and* his/her Social Security Number.
- **9b**. Enter the other insured's date of birth.
- **9c**. Enter the other insured's employer's name or school name.

**9d.** Enter the insurance plan name or the program name (e.g., the insured's health maintenance organization, or private supplementary insurance).

Please note: DSHS, Welfare, Provider Services, Healthy Kids, First Steps, Medicare, Indian Health, PCCM, Healthy Options, PCOP, etc., are <u>inappropriate</u> entries for this field.

- 10. <u>Is Patient's Condition Related To:</u>
  Required. Check *yes* or *no* to indicate whether employment, auto accident or other accident involvement applies to one or more of the services described in *field 24. Indicate the name of the coverage source in field 10d* (L&I, name of insurance company, etc.).
- 11. <u>Insured's Policy Group or FECA</u>
  (Federal Employees Compensation
  Act) Number: Primary insurance.
  When applicable. This information applies to the insured person listed in field 4. Enter the insured's policy and/or group number and his/her social security number. The data in this field will indicate that the client has other insurance coverage and MAA pays as payer of last resort.
- 11a. <u>Insured's Date of Birth</u>:
  Primary insurance. When applicable, enter the insured's birthdate, if different from *field 3*.
- 11b. Employer's Name or School Name:
  Primary insurance. When
  applicable, enter the insured's
  employer's name or school name.

- 11c. Insurance Plan Name or Program
  Name: Primary insurance. When applicable, show the insurance plan or program name to identify the primary insurance involved. (Note: This may or may not be associated with a group plan.)
- 11d. Is There Another Health Benefit Plan?: Required if the client has secondary insurance. Indicate yes or no. If yes, you should have completed fields 9a.-d. If the client has insurance, and even if you know the insurance will not cover the service you are billing, you must check yes. If 11d. is left blank, the claim may be processed and denied in error.
- 19. Reserved For Local Use Required. When Medicare allows services, enter XO to indicate this is a crossover claim.
- 22. Medicaid Resubmission: When applicable. If this billing is being resubmitted more than six (6) months from Medicare's paid date, enter the Internal Control Number (ICN) that verifies that your claim was originally submitted within the time limit. [The ICN number is the claim number listed on the Remittance Advice and Status Report (RA).] Also enter the three-digit denial Explanation of Benefits (EOB).
- 24. Enter only one (1) procedure code per detail line (fields 24A 24K).

  If you need to bill more than six (6) lines per claim, please use an additional HCFA-1500 claim form.

- 24A. <u>Date(s) of Service</u>: Required. Enter the "from" and "to" dates using all six digits for each date. Enter the month, day, and year of service numerically (e.g., September 4, 2001 = 090401).

  Do not use slashes, dashes, or hyphens to separate month, day, or year (MMDDYY).
- **24B.** Place of Service: Required. These are the only appropriate code(s) for this billing instruction:

#### **Code Number To Be Used For**

- Home
   Assisted Living
   Facility
   Nursing Facility
   Skilled Nursing
   Facility
   Other place of service
- **24C.** Type of Service: Not Required.
- 24D. Procedures, Services or Supplies
  HCPCS: Required. Enter the
  appropriate HCFA Common Procedure
  Coding System (HCPCS) procedure
  code for the services being billed.
  MODIFIER: When appropriate enter
  a modifier.
- **24E.** <u>Diagnosis Code</u>: Enter appropriate diagnosis code for condition.
- 24F. Scharges: Required. Enter the amount you billed Medicare for the service performed. If more than one unit is being billed, the charge shown must be for the total of the units billed. Do not include dollar signs or decimals in this field. Do not add sales tax.

- **24G. Days or Units**: Required. Enter the number of units billed and paid for by Medicare.
- **24K.** Reserved for Local Use: Required. Use this field to show Medicare allowed charges. Enter the Medicare allowed charge on each detail line of the claim (see sample).
- 26. Your Patient's Account No.: Not required. Enter an alphanumeric ID number, for example, a medical record number or patient account number. This number will be printed on your Remittance Advice and Status Report (RA) under the heading Patient Account Number.
- 27. <u>Accept Assignment</u>: Required. Check yes.
- **28.** <u>Total Charge</u>: Required. Enter the sum of your charges. Do not use dollar signs or decimals in this field.
- 29. Amount Paid: Required. Enter the Medicare Deductible here. Enter the amount as shown on Medicare's Remittance Notice and Explanation of Medicare Benefits (EOMB). If you have more than six (6) detail lines to submit, please use multiple HCFA-1500 claim forms (see field 24) and calculate the deductible based on the lines on each form. Do not include coinsurance here.

Medicare Total Payment. Enter the Medicare Total Payment. Enter the amount as shown on Medicare's Remittance Notice or Explanation of Medicare Benefits (EOMB). If you have more than six (6) detail lines to submit, please use multiple HCFA claim forms (see field 24) and calculate the Medicare payment based on the lines on each form. Do not include coinsurance here.

### 32. Name and Address of Facility Where Services Are Rendered:

Required. Enter Medicare Statement Date *and* any Third-Party Liability Dollar Amount (e.g., auto, employee-sponsored, supplemental insurance) here, if any. If there is insurance payment on the claim, you must also attach the insurance Explanation of Benefits (EOB). **Do not include coinsurance here.** 

33. Physician's, Supplier's Billing
Name, Address, Zip Code and
Phone #: Required.

P.I.N. #: Required. Enter the individual provider number assigned to you by MAA.

Code		LINK TO Legend For Co	de Status mulcator
Status			Maximum
Indicator	Code	Comments	Allowable Fee
	A4280		#
	A5500		\$59.36
	A5501		\$178.04
	A5503		\$26.40
	A5504		\$26.40
	A5505		\$26.40
	A5506		\$26.40
	A5507		BR
	A5508		#
	A5510		#
	A5512		\$24.22
	A5513		\$36.14
	E1800		#
	E1801		#
	E1802		#
	E1805		#
	E1806		#
	E1810		#
	E1811		# # # # #
	E1815		#
	E1816		#
	E1818		
	E1820		#
	E1821		#
	E1825		#
	E1830		#
	E1840		#
	L0100		\$435.69
	L0100		\$117.28
	L0110		\$1,099.77
	L0112 L0120		\$26.63
			\$148.18
	L0130 L0140		\$64.25
	L0150		\$85.57
	L0160		\$117.90
	L0170		\$571.88
	L0172		\$103.21
	L0174		\$217.30
	L0180		\$316.84
	L0190		\$445.76
	L0200		\$497.74
	L0210		\$33.33
	L0220		\$99.18
	L0430		\$1,008.64
	L0450		\$172.77
	L0452		BR
	L0454		\$272.52
	L0456		\$781.51

Code			
Status			Maximum
Indicator	Code	Comments	Allowable Fee
	L0458		\$700.77
	L0460		\$788.75
	L0462		\$981.08
	L0464		\$1,167.97
	L0466		\$355.15
	L0468		\$426.29
	L0470		\$511.66
	L0472		\$363.35
	L0474		BR
	L0480		\$1,252.86
	L0482		\$1,276.86
	L0484		\$1,337.75
	L0486		\$1,419.28
	L0490		\$222.28
	L0491		\$603.47
	L0492		\$396.93
	L0621		\$90.97
	L0622		\$241.43
	L0623		BR
	L0624		BR
	L0625		\$43.27
	L0626		\$61.25
	L0627		\$322.98
	L0628		\$65.92
	L0629		BR
	L0630		\$127.26
	L0631		\$806.64
	L0632		BR
	L0633		\$225.31
	L0634		BR
	L0635		\$830.31
	L0636		\$1,082.60
	L0637		\$883.16
	L0638		\$1,036.35
	L0639		\$883.16
	L0640		\$822.21
	L0700		\$1,521.85
	L0710		\$1,718.90
	L0810		\$2,069.69
	L0820		\$2,032.60
	L0830		\$2,851.00
	L0859		\$917.03
	L0861		\$169.36
	L0960		\$53.69
	L0970		\$86.03
	L0972		\$77.47
	L0974		\$139.44
	L0976		\$147.36
		-	

Code Status	C- 1-	Comments	Maximum
Indicator	Code	Comments	Allowable Fee
	L0978		\$154.46
	L0980		\$13.98
	L0982		\$13.04
	L0984		\$51.46
	L0999		BR
	L1000		\$1,830.40
	L1005		\$2,514.93
	L1010		\$52.40
	L1020		\$76.83
	L1025		\$93.87
	L1030 L1040		\$49.19
	L1040		\$72.64 \$77.15
	L1050		\$84.83
	L1060 L1070		\$84.83 \$76.66
	L1070 L1080		\$47.39
	L1080		\$123.71
	L1083		\$74.81
	L1090		\$135.96
	L1110		\$224.99
	L1110		\$37.00
	L1200		\$1,572.58
	L1210		\$1,372.38
	L1210		\$204.01
	L1230		\$427.91
	L1240		\$62.47
	L1250		\$57.14
	L1260		\$60.32
	L1270		\$58.32
	L1280		\$67.56
	L1290		\$60.44
	L1300		\$1,271.62
	L1310		\$1,424.31
	L1499		ψ1,+2+.31 BR
	L1500		\$1,670.18
	L1510		\$1,063.94
	L1520		\$2,076.95
	L1600		\$97.00
	L1610		\$33.05
	L1620		\$106.26
	L1630		\$137.77
	L1640		\$363.37
	L1650		\$174.28
	L1652		\$280.10
	L1660		\$139.61
	L1680		\$1,222.90
	L1685		\$895.39
	L1686		\$696.29

Code			
Status			Maximum
Indicator	Code	Comments	Allowable Fee
	L1690		\$1,519.45
	L1700		\$1,236.32
	L1710		\$1,495.83
	L1720		\$1,043.47
	L1730		\$890.31
	L1755		\$1,191.80
	L1800		\$50.83
	L1810		\$85.82
	L1815		\$88.48
	L1820		\$108.58
	L1825		\$48.35
	L1830		\$84.16
	L1831		\$231.26
	L1832		\$457.65
	L1834		\$584.33
	L1836		\$104.84
	L1840		\$800.64
	L1843		\$705.03
	L1844		\$1,583.74
	L1845		\$638.98
	L1846		\$992.62
	L1847		\$451.94
	L1850		\$241.96
	L1855		\$864.05
	L1858		\$999.60
	L1860		\$987.59
	L1870		\$876.27
	L1880		\$710.40
	L1900		\$223.88
	L1901		\$13.91
	L1902		\$73.68
	L1904		\$353.98
	L1906		\$90.53
	L1907		\$442.14
	L1910		\$254.63
	L1920		\$337.30
	L1930		\$207.97
	L1932		\$701.18
	L1940		\$399.91
	L1945		\$786.31
	L1950		\$747.58
	L1951		\$659.91
	L1960		\$417.24
	L1970		\$556.82
	L1971		\$368.30
	L1980		\$353.33
	L1990		\$426.94
	L2000		\$1,018.01

Indicator         Code         Comments         Allowable Fee           1 2000         \$3,219.82           1 12020         \$11,7194           1 12030         \$1,009.29           R 1 12034         \$1,509.39           1 12035         \$141.40           1 12036         \$1,801.70           1 12037         \$148.63           1 12038         \$1,252.13           1 12040         \$171.99           1 12050         \$363.67           1 12050         \$363.67           1 12080         \$312.21           1 12080         \$311.23           1 12080         \$312.21           1 12080         \$312.21           1 12080         \$340.12           1 12106         \$5527.55           1 12112         \$344.13           1 12112         \$344.13           1 12114         \$446.83           1 12115         \$552.85           1 12126         \$590.73           1 12132         \$607.23           1 12134         \$576.13           1 12135         \$890.21           1 12136         \$890.21           1 12180         \$881.12           1 12180         <	Code			
1,2005	Status			Maximum
1.2010	Indicator		Comments	
L2020				
L2030   S1,009,29				
R L2034				
L2035				
L2036   \$1,801.70     L2037   \$1,486.38     L2038   \$1,252.13     L2040   \$171.99     L2050   \$363.67     L2060   \$151.90     L2070   \$101.23     L2080   \$312.12     L2090   \$441.01     L2106   \$527.55     L2108   \$902.07     L2112   \$364.13     L2114   \$446.83     L2116   \$535.89     L2126   \$901.39     L2128   \$1,721.33     L2134   \$761.35     L2136   \$880.723     L2136   \$881.12     L2181   \$121.84     L2182   \$81.12     L2184   \$93.25     L2185   \$1,721.30     L2186   \$1,721.30     L2187   \$1,721.30     L2188   \$1,721.30     L2189   \$1,721.30     L2180   \$1,721.30     L2181   \$1,721.30     L2182   \$1,721.30     L2184   \$1,721.30     L2185   \$1,721.30     L2186   \$1,721.30     L2187   \$1,721.30     L2188   \$1,721.30     L2190   \$1,721.30     L2200   \$1,722.30     L2220   \$1,723.30     L2232   \$1,723.30     L2232   \$1,723.30     L2232   \$1,723.30     L2232   \$1,723.30     L2230   \$1,723.30     L2250   \$1,535.64     L2265   \$1,535.64     L2270   \$1,535.64     L2280   \$1,535.64     L2300   \$2,525.69     L2310   \$1,535.74     L2320   \$1,53	R			
L2037				
L2038				
L2040   S171.99				
L2050				
L2060   S514.90   S101.23     L2080   S312.12     L2090   S440.10     L2106   S527.55     L2108   S902.07     L2112   S364.13     L2114   S446.83     L2116   S535.89     L2126   S901.39     L2128   S1,721.03     L2132   S607.23     L2134   S761.23     L2136   S890.21     L2180   S880.21     L2180   S881.12     L2181   S881.12     L2182   S81.12     L2184   S81.12     L2185   S81.12     L2186   S130.48     L2188   S244.28     L2190   S65.74     L2190   S65.74     L2120   S72.86     L220   S72.86     L220   S72.86     L220   S72.86     L220   S63.55     L2250   S356.64     L2260   S150.90     L2255   S88.55     L2270   S53.90     L2275   S117.73     L2280   S341.37     L2300   S522.69     L2210   S53.90     L2275   S117.73     L2280   S341.37     L2300   S252.69     L2210   S122.60     L2270   S53.90     L2275   S117.73     L2280   S341.37     L2300   S252.69     L2210   S123.47     L2320   S1				
L2070   \$101.23     L2080   \$312.12     L2090   \$440.10     L2106   \$527.55     L2108   \$902.07     L2112   \$364.13     L2114   \$446.83     L2116   \$535.89     L2126   \$901.39     L2128   \$1,721.03     L2132   \$607.23     L2134   \$761.35     L2136   \$890.21     L2180   \$880.21     L2180   \$881.12     L2181   \$81.12     L2182   \$81.12     L2184   \$93.25     L2185   \$81.12     L2186   \$130.48     L2188   \$244.28     L2190   \$65.74     L2190   \$530.49     L2210   \$530.49     L2220   \$72.86     L2230   \$70.91     L2230   \$70.91     L2250   \$386.64     L2260   \$150.90     L2255   \$88.55     L2275   \$117.73     L2280   \$3341.37     L2280   \$341.37     L2290   \$523.64     L2275   \$117.73     L2280   \$341.37     L2280   \$341.37     L2210   \$53.49     L2275   \$117.73     L2280   \$341.37     L2230   \$523.69     L2230   \$533.64     L2275   \$117.73     L2280   \$3341.37     L2280   \$341.37     L2230   \$5123.49     L2230   \$5123.69     L2230   \$5123.69     L2230   \$5123.69     L2230   \$5123.69     L2230   \$5123.69     L2310   \$5123.49     L2320   \$5123.69     L2330   \$5123.69     L3310   \$5123.69				
L2080   \$312.12     L2090   \$440.10     L2106   \$527.55     L2108   \$992.07     L2112   \$364.13     L2114   \$446.83     L2116   \$533.89     L2126   \$901.39     L2128   \$1,721.03     L2132   \$667.23     L2134   \$761.35     L2136   \$8902.27     L2136   \$889.21     L2180   \$88.15     L2180   \$88.15     L2181   \$93.25     L2184   \$93.25     L2185   \$1,721.03     L2186   \$1,721.03     L2187   \$1,721.03     L2188   \$244.28     L2190   \$65.74     L2192   \$268.40     L2200   \$47.72     L2210   \$533.04     L2220   \$72.86     L2230   \$70.91     L2232   \$81     L2240   \$63.55     L2250   \$3356.64     L2260   \$150.90     L2265   \$88.65     L2275   \$117.73     L2280   \$3341.37     L2300   \$252.69     L2310   \$123.47     L2310   \$123.47     L2310   \$123.47     L2310   \$123.47     L2310   \$123.47     L2320   \$341.37     L2300   \$252.69     L2310   \$123.47     L2310   \$123.47     L2320   \$197.85     L2330   \$252.69     L23310   \$123.47     L2300   \$252.69     L23310   \$123.47     L2300   \$123.47     L2300   \$252.69     L2310   \$123.47     L2320   \$197.85     L2330   \$197.85     L2330				\$514.90
L2090				
L2106       \$527.55         L2108       \$902.07         L2112       \$364.13         L2114       \$446.83         L2116       \$535.83         L2126       \$901.39         L2128       \$1,721.03         L2132       \$607.23         L2134       \$761.33         L2136       \$890.21         L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2185       \$130.48         L2180       \$65.74         L2190       \$65.74         L2191       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2250       \$356.64         L2250       \$356.69         L2250       \$359.00         L2250       \$359.00         L2250       \$359.00         L2250       \$359.00         L2265       \$88.65         L2270       \$53.90         L2250		L2080		
L2108       \$902.07         L2112       \$364.13         L2114       \$446.83         L2116       \$535.89         L2126       \$901.39         L2128       \$1,721.03         L2132       \$607.23         L2134       \$761.35         L2136       \$890.21         L2180       \$81.12         L2181       \$93.25         L2182       \$81.12         L2183       \$93.25         L2184       \$93.25         L2185       \$130.48         L2190       \$65,74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$65.55         L2250       \$356.64         L2250       \$350.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.73         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2090		\$440.10
L2112       \$364.13         L2114       \$446.83         L2116       \$535.89         L2126       \$901.30         L2128       \$1,721.30         L2132       \$607.23         L2134       \$761.35         L2136       \$890.21         L2180       \$881.5         L2182       \$81.15         L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.26         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2230       \$70.91         L2230       \$65.55         L2240       \$65.55         L2250       \$356.69         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$351.73         L2300       \$252.69         L2310       \$123.47         L2310       \$123.47		L2106		\$527.55
L2114       \$446.83         L2126       \$535.89         L2128       \$901.39         L2132       \$607.23         L2134       \$761.35         L2136       \$890.21         L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2189       \$65.74         L2190       \$65.74         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$65.74         L2250       \$356.64         L2250       \$356.64         L2260       \$150.90         L2250       \$356.64         L2265       \$88.65         L2270       \$53.90         L2255       \$117.73         L2280       \$341.37         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2108		\$902.07
L2116       \$535.89         L2126       \$901.39         L2128       \$1,721.03         L2132       \$676.23         L2134       \$7676.35         L2136       \$880.21         L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2189       \$245.24         L2190       \$258.44         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$35.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2280       \$341.37         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2112		\$364.13
L2126       \$901.39         L2128       \$1,721.03         L2132       \$607.23         L2134       \$761.35         L2136       \$890.21         L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2265       \$88.65         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2114		\$446.83
L2128       \$1,721.03         L2132       \$607.23         L2134       \$761.35         L2136       \$890.21         L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2116		\$535.89
L2132       \$607.23         L2134       \$761.35         L2136       \$890.21         L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2126		\$901.39
L2134       \$761.35         L2136       \$890.21         L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$356.49         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2128		\$1,721.03
L2136       \$890.21         L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2310       \$123.47         L2320       \$197.85		L2132		\$607.23
L2180       \$88.15         L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2134		\$761.35
L2182       \$81.12         L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2136		\$890.21
L2184       \$93.25         L2186       \$130.48         L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2180		\$88.15
L2186       \$130,48         L2188       \$244,28         L2190       \$65,74         L2192       \$268,40         L2200       \$47,72         L2210       \$53,04         L2220       \$72,86         L2230       \$70,91         L2232       BR         L2240       \$63,55         L2250       \$356,64         L2260       \$150,90         L2265       \$88,65         L2270       \$53,90         L2275       \$117,73         L2300       \$341,37         L2310       \$123,47         L2320       \$197,85		L2182		\$81.12
L2188       \$244.28         L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2184		\$93.25
L2190       \$65.74         L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2186		\$130.48
L2192       \$268.40         L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$197.85		L2188		\$244.28
L2200       \$47.72         L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$197.85		L2190		\$65.74
L2210       \$53.04         L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2192		\$268.40
L2220       \$72.86         L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$197.85		L2200		\$47.72
L2230       \$70.91         L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2310       \$252.69         L2320       \$197.85		L2210		\$53.04
L2232       BR         L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2310       \$252.69         L2320       \$197.85		L2220		\$72.86
L2240       \$63.55         L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2230		\$70.91
L2250       \$356.64         L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2232		BR
L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2240		\$63.55
L2260       \$150.90         L2265       \$88.65         L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2250		\$356.64
L2270       \$53.90         L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2260		\$150.90
L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2265		\$88.65
L2275       \$117.73         L2280       \$341.37         L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2270		\$53.90
L2300       \$252.69         L2310       \$123.47         L2320       \$197.85		L2275		\$117.73
L2300       \$252.69         L2310       \$123.47         L2320       \$197.85				\$341.37
L2310 \$123.47 L2320 \$197.85				\$252.69
L2320 \$197.85				\$123.47
				\$197.85
				\$349.68

Code			M
Status Indicator	C- 1-	C	Maximum
Indicator	Code	Comments	Allowable Fee
	L2335		\$187.22
	L2340		\$415.45
	L2350		\$756.71
	L2360		\$51.93
	L2370		\$206.49
	L2375		\$85.05
	L2380		\$94.35
D	L2385		\$100.83
R	L2387		\$152.87
	L2390		\$82.40
	L2395		\$117.78
	L2397		\$99.48
	L2405		\$68.50
	L2415		\$95.43
	L2425		\$112.64
	L2430		\$112.64
	L2492		\$79.60
	L2500		\$254.97
	L2510		\$621.98
	L2520		\$366.43
	L2525		\$976.79
	L2526		\$687.46
	L2530		\$184.68
	L2540		\$401.43
	L2550		\$235.90
	L2570		\$369.37
	L2580		\$412.89
	L2600		\$179.07
	L2610		\$215.81
	L2620		\$236.75
	L2622		\$230.84
	L2624		\$249.27
	L2627		\$1,290.44
	L2628		\$1,681.54
	L2630		\$196.90
	L2640		\$306.87
	L2650		\$120.45
	L2660		\$140.30
	L2670		\$132.75
	L2680		\$117.80
	L2750		\$73.92
	L2755		\$102.68
	L2760		\$46.70
	L2768		\$102.38
	L2770		\$46.48
	L2780		\$67.92
	L2785		\$26.34
	L2795		\$79.29

Code   Status   Indicator   Code   Comments   Allowali	
L2800     L2810     L2820     L2830     L2840     L2850     L2860     L2999     L3000     L3001     L3002     L3003     L3010     L3020     L3030     L3031     L3040     L3050     L3060     L3070     L3080     L3140     L3150     L3150     L3160     L3170     L3201	
L2810     L2820     L2830     L2840     L2850     L2860     L2999     L3000     L3001     L3002     L3010     L3020     L3031     L3040     L3050     L3060     L3070     L3080     L3100     L3090     L3140     L3150     L3160     L3170     L3201	
L2820     L2830     L2840     L2850     L2860     L2999     L3000     L3001     L3002     L3010     L3020     L3030     L3031     L3040     L3050     L3060     L3070     L3080     L3090     L3140     L3150     L3150     L3170     L3201	\$92.04
L2830     L2840     L2850     L2860     L2999     L3000     L3001     L3002     L3010     L3020     L3030     L3031     L3040     L3050     L3060     L3070     L3080     L3100     L3100     L31100     L3150     L3150     L3160     L3170     L3170     L3201	\$58.79
L2840     L2850     L2860     L2999     L3000     L3001     L3002     L3010     L3020     L3030     L3031     L3040     L3050     L3060     L3070     L3080     L3100     L3100     L3110     L3150     L3150     L3160     L3170     L3201	\$65.37
L2850         L2999         L3000         L3001         L3002         L3003         L3010         L3020         L3030         L3031         L3040         L3050         L3060         L3070         L3080         L3100         L3140         L3150         L3170         L3201	\$70.72
L2860   L2999	\$32.89
L2999	\$46.61
L3000     L3001     L3002     L3003     L3010     L3020     L3030     L3031     L3040     L3050     L3060     L3070     L3080     L3100     L3140     L3150     L3160     L3170     L3201	#
L3001  L3002  L3003  L3010  L3020  L3030  L3031  L3040  L3050  L3060  L3070  L3080  L3100  L3140  L3150  L3170  L3201	BR
L3002 L3003 L3010 L3020 L3020 L3030 L3031 L3040 L3050 L3060 L3070 L3080 L3090 L3140 L3150 L3160 L3170 L3201	\$246.83
L3003 L3010 L3020 L3030 L3031 L3040 L3050 L3060 L3070 L3080 L3100 L3140 L3150 L3160 L3170 L3201	#
L3010 L3020 L3030 L3031 L3040 L3050 L3060 L3070 L3080 L3100 L3140 L3150 L3170 L3170 L3201	#
L3020  L3030  L3031  L3040  L3050  L3060  L3070  L3080  L3100  L3140  L3150  L3160  L3170  L3201	#
L3030 L3040 L3050 L3060 L3070 L3080 L3090 L3140 L3150 L3170 L3170 L3201	#
L3031 L3040 L3050 L3060 L3070 L3080 L3090 L3100 L3140 L3150 L3160 L3170 L3201	#
L3040 L3050 L3060 L3070 L3080 L3090 L3100 L3140 L3150 L3160 L3170 L3201	\$59.97
L3040 L3050 L3060 L3070 L3080 L3090 L3100 L3140 L3150 L3160 L3170 L3201	BR
L3050 L3060 L3070 L3080 L3090 L3100 L3140 L3150 L3160 L3170 L3201	#
L3060 L3070  L3080 L3090  L3100 L3140  L3150 L3160 L3170 L3201	
L3070  L3080  L3090  L3100  L3140  L3150  L3160  L3170  L3201	# # #
L3080 L3090 L3100 L3140 L3150 L3160 L3170 L3201	#
L3090 L3100 L3140 L3150 L3160 L3170 L3201	#
L3100 L3140 L3150 L3160 L3170 L3201	#
L3140 L3150 L3160 L3170 L3201	\$33.97
L3150 L3160 L3170 L3201	\$69.96
L3160 L3170 L3201	\$63.96
L3170 L3201	\$03.90 #
L3201	
	BR
L3202	#
X 2202	#
L3203	#
L3204	# # #
L3206	#
L3207	
L3208	#
L3209	#
L3211	#
L3212	# # # #
L3213	#
L3214	#
L3215	\$84.34
L3216	#
L3217	#
L3219	\$97.02
L3221	#
L3222	#
L3224	#
L3225	#
L3230	\$277.90

Code		Link to Legend For Co.	de Status muicator
Status			Maximum
Indicator	Code	Comments	Allowable Fee
	L3250		#
	L3251		#######################################
	L3252		#
	L3253		#
	L3254		#
	L3255		#
	L3257		#
	L3260		#
	L3265		#
	L3300		#
	L3310		\$63.96
	L3320		\$63.96
	L3330		#
	L3332		#
	L3334		\$29.98
	L3340		\$66.96
	L3350		\$18.00
	L3360		\$27.98
	L3370		#
	L3380		#
	L3390		#
	L3400		\$31.99
	L3410		\$72.94
	L3420		\$42.97
	L3430		\$125.92
	L3440		#
	L3450		#
	L3455		#
	L3460		#
	L3465		#
	L3470		#
	L3480		#
	L3485		# # # #
	L3500		
	L3510		#
	L3520		#
	L3520		#
	L3540		#
	L3540 L3550		#
	L3560		#
	L3570		#
	L3570		#
	L3590		#
	L3595		# 
			#
	L3600		######################################
	L3610		
	L3620		\$59.97
	L3630		#

Code	Link to Legend For Code Status Indicator			
Status			Maximum	
Indicator	Code	Comments	Allowable Fee	
	L3640		#	
	L3649		#	
	L3650		\$46.56	
	L3651		\$47.09	
	L3652		\$141.90	
	L3660		\$75.71	
	L3670		\$86.58	
R	L3671		\$644.37	
R	L3672		\$801.31	
R	L3673		\$873.35	
	L3675		#	
	L3677		BR	
	L3700		\$58.06	
	L3701		\$14.56	
R	L3702		\$206.49	
	L3710		\$91.06	
	L3720		\$575.48	
	L3730		\$774.24	
	L3740		\$790.36	
	L3760		\$357.62	
	L3762		\$76.89	
R	L3763		\$916.94	
R	L3764		\$970.98	
R	L3765		\$916.94	
R	L3766		\$970.98	
	L3800		\$195.83	
	L3805		\$241.53	
	L3807		\$178.81	
	L3810		\$47.74	
	L3815		\$44.32	
	L3820		\$76.12	
	L3825		\$49.42	
	L3830		\$63.79	
	L3835		\$90.14	
	L3840		\$46.30	
	L3845		\$67.99	
	L3850		\$85.41	
	L3855		\$86.10	
	L3860		\$117.86	
	L3890		#	
	L3900		\$1,072.74	
	L3901		\$1,326.23	
	L3902		BR	
	L3904		\$2,157.12	
R	L3905		\$709.19	
	L3906		\$305.26	
	L3907		\$374.18	
	L3908		\$58.85	

Code	Link to Legend For Code Status Indicate			
Status			Maximum	
Indicator	Code	Comments	Allowable Fee	
	L3909		\$10.09	
	L3910		\$276.30	
	L3911		\$17.71	
	L3912		\$93.14	
R	L3913		\$193.69	
	L3914		\$73.22	
	L3916		\$99.20	
	L3917		\$75.54	
	L3918		\$62.74	
R	L3919		\$193.69	
T(	L3920		\$82.38	
R	L3921		\$229.71	
T(	L3922		\$96.04	
	L3923		\$27.82	
	L3924		\$104.73	
	L3926		\$72.68	
	L3928		\$46.75	
	L3928		\$45.32	
	L3930			
R	L3932 L3933		\$40.06 \$152.58	
K				
D	L3934		\$47.32	
R	L3935		\$157.98	
	L3936		\$87.49	
	L3938		\$90.04	
	L3940		\$105.58	
	L3942		\$57.24	
	L3944		\$77.45	
	L3946		\$87.04	
	L3948		\$40.95	
	L3950		\$129.64	
	L3952		\$163.46	
	L3954		\$89.46	
	L3956		BR	
	L3960		\$608.72	
R	L3961		\$1,201.47	
	L3962		\$657.81	
	L3964		#	
	L3965		#	
	L3966		#	
R	L3967		\$1,418.53	
	L3968		#	
	L3969		\$660.74	
	L3970		\$242.49	
R	L3971		\$1,346.51	
	L3972		\$142.86	
R	L3973		\$1,418.53	
	L3974		\$142.55	
R	L3975		\$1,201.47	

Code	Link to Legend For Code Status Indicato			
Status Indicator	Code	Comments	Maximum Allowable Fee	
R	L3976	Comments	\$1,201.47	
R	L3977		\$1,346.51	
R	L3978		\$1,418.53	
K	L3980		\$227.72	
	L3980			
	L3982 L3984		\$274.99 \$264.62	
	L3985		\$469.09	
	L3986		\$453.76	
	L3995		\$26.74	
	L3999		BR	
	L4000		\$1,090.39	
	L4002		BR	
	L4010		\$602.47	
	L4020		\$721.32	
	L4030		\$497.38	
	L4040		\$409.70	
	L4045		\$249.09	
	L4050		\$374.43	
	L4055		\$204.14	
	L4060		\$304.16	
	L4070		\$250.75	
	L4080		\$90.17	
	L4090		\$90.56	
	L4100		\$104.69	
	L4110		\$85.11	
	L4130		\$497.96	
	L4205		\$17.30	
	L4210		BR	
	L4350		\$74.10	
	L4360		\$277.90	
	L4300		\$189.48	
			i	
	L4380		\$103.70 \$124.58	
	L4386			
	L4392		##	
	L4394			
	L4396		\$129.66	
	L4398		# #405.20	
	L5000		\$405.20	
	L5010		\$976.35	
	L5020		\$1,810.65	
	L5050		\$2,161.80	
	L5060		\$2,868.66	
	L5100		\$2,240.73	
	L5105		\$3,162.42	
	L5150		\$3,269.91	
	L5160		\$3,989.39	
	L5200		\$3,266.78	
	L5210		\$2,594.72	

Code			
Status	~ -	~	Maximum
Indicator	Code	Comments	Allowable Fee
	L5220		\$2,949.37
	L5230		\$3,944.60
	L5250		\$5,133.11
	L5270		\$5,499.47
	L5280		\$5,444.47
	L5301		\$2,246.78
	L5311		\$3,527.05
	L5321		\$3,470.89
	L5331		\$4,924.78
	L5341		\$5,140.13
	L5400		\$1,072.47
	L5410		\$412.25
	L5420		\$1,295.39
	L5430		\$404.33
	L5450		\$353.84
	L5460		\$468.51
	L5500		\$1,029.99
	L5505		\$1,394.88
	L5510		\$1,265.14
	L5520		\$1,153.27
	L5530		\$1,609.41
	L5535		\$1,662.40
	L5540		\$1,774.39
	L5560		\$1,733.49
	L5570		\$1,823.29
	L5580		\$2,088.71
	L5585		\$2,314.99
	L5590		\$2,026.68
	L5595		\$3,620.26
	L5600		\$4,563.08
	L5610		\$2,130.15
	L5611		\$1,414.90
	L5613		\$1,965.38
	L5614		\$1,328.51
	L5616		\$1,089.20
	L5617		\$440.50
	L5618		\$250.52
	L5620		\$237.89
	L5622		\$335.50
	L5624		\$302.05
	L5626		\$438.52
	L5628		\$484.88
	L5629		\$254.87
	L5630		\$406.16
	L5631		\$352.37
	L5632		\$237.43
	L5634		\$282.85
	L5636		\$252.09
<u> </u>	LJUJU		\$454.09

Code			M
Status Indicator	C. J.	Comments.	Maximum
Indicator	Code	Comments	Allowable Fee
	L5637		\$238.76
	L5638		\$442.43
	L5639		\$1,013.41
	L5640		\$671.18
	L5642		\$662.50
	L5643		\$1,432.92
	L5644		\$528.87
	L5645		\$639.88
	L5646		\$470.37
	L5647		\$637.93
	L5648		\$528.00
	L5649		\$1,614.01
	L5650		\$460.24
	L5651		\$963.10
	L5652		\$349.64
	L5653		\$573.65
	L5654		\$310.70
	L5655		\$278.40
	L5656		\$396.66
	L5658		\$388.79
	L5661		\$488.03
	L5665		\$410.63
	L5666		\$56.97
	L5668		\$89.98
	L5670		\$237.53
	L5671		\$531.87
	L5672		\$258.78
	L5673		\$574.46
	L5676		\$338.54
	L5677		\$430.96
	L5678		\$37.95
	L5679		\$478.72
	L5680		\$284.33
	L5681		\$1,035.59
	L5682		\$507.06
	L5683		\$1,035.59
	L5684		\$51.46
	L5685		\$100.83
	L5686		\$51.12
	L5688		\$55.96
	L5690		\$85.11
	L5692		\$125.06
	L5694		\$193.23
	L5695		\$130.79
	L5696		\$197.84
	L5697		\$85.84
	L5698		\$100.29
	L5699		\$197.13

Code Status			Maximum
Indicator	Code	Comments	Allowable Fee
	L5700		\$2,928.30
	L5701		\$3,558.50
	L5702		\$4,261.00
R	L5703		\$1,965.06
	L5704		\$489.05
	L5705		\$802.86
	L5706		\$795.73
	L5707		\$1,131.18
	L5710		\$364.90
	L5711		\$493.99
	L5712		\$443.47
	L5714		\$335.44
	L5716		\$584.51
	L5718		\$730.57
	L5722		\$850.64
	L5724		\$1,288.05
	L5726		\$1,558.83
	L5728		\$2,074.60
	L5780		\$918.18
	L5781		\$3,150.08
	L5782		\$3,320.90
	L5785		\$497.75
	L5790		\$599.31
	L5795		\$861.07
	L5810		\$445.88
	L5811		\$584.89
	L5812		\$506.19
	L5814		\$2,923.91
	L5816		\$682.03
	L5818		\$770.15
	L5822		\$1,365.67
	L5824		\$1,229.87
	L5826		\$2,554.04
	L5828 L5830		\$2,264.70 \$1,974.64
	L5840		\$3,236.89
	L5845		\$3,230.89
	L5848		\$846.60
	L5850		\$102.59
	L5855		\$330.23
	L5856		\$330.23
	L5857		
			\$6,706.30
	L5858		
	L5910		\$290.45
	L5920		\$425.51
	L5925		\$349.76
	L5930		# #500.15
	L5940		\$500.15

Code			
Status		_	Maximum
Indicator	Code	Comments	Allowable Fee
	L5950		\$718.91
	L5960		\$821.68
	L5962		\$628.52
	L5964		\$904.80
	L5966		\$1,173.04
	L5968		\$2,860.96
	L5970		\$196.72
R	L5971		\$196.72
	L5972		\$314.39
	L5974		\$249.17
	L5975		\$364.98
	L5976		\$502.06
	L5978		\$283.75
	L5979		\$2,417.33
	L5980		\$3,251.18
	L5981		\$2,626.94
	L5982		\$612.83
	L5984		\$579.36
	L5985		\$222.32
	L5986		\$613.20
	L5987		#
	L5988		\$1,572.78
	L5990		\$1,428.31
	L5995		BR
	L5999		BR
	L6000		\$1,420.76
	L6010		\$1,581.07
	L6020		\$1,474.10
	L6025		\$6,300.21
	L6050		\$1,741.15
	L6055		\$2,599.80
	L6100		\$1,875.45
	L6110		\$1,912.82
	L6120		\$2,405.32
	L6130		\$2,768.09
	L6200		\$2,840.81
	L6205		\$3,559.11
	L6250		\$2,649.24
	L6300		\$3,726.51
	L6310		\$3,093.31
	L6320		\$1,370.51
	L6350		\$4,188.33
	L6360		\$3,405.88
	L6370		\$1,628.86
	L6380		\$1,096.66
	L6382		\$1,291.03
	L6384		\$1,634.44
	L6386		\$370.20

Code Status			Maximum
Indicator	Code	Comments	Allowable Fee
	L6388		\$406.89
	L6400		\$2,076.28
	L6450		\$2,818.52
	L6500		\$2,850.73
	L6550		\$3,813.47
	L6570		\$4,250.91
	L6580		\$1,444.62
	L6582		\$1,148.00
	L6584		\$1,950.52
	L6586		\$1,667.02
	L6588		\$2,822.59
	L6590		\$2,600.80
	L6600		\$162.99
	L6605		\$153.77
	L6610		\$140.25
	L6615		\$171.39
	L6616		\$62.46
	L6620		\$268.45
R	L6621		\$1,800.78
	L6623		\$577.50
	L6625		\$493.89
	L6628		\$463.82
	L6629		\$117.55
	L6630		\$172.84
	L6632		\$52.10
	L6635		\$151.52
	L6637		\$348.46
	L6638		\$1,968.81
	L6640		\$276.29
	L6641		\$137.71
	L6642		\$186.26
	L6645		\$317.93
	L6646		\$2,483.11
	L6647		\$408.79
	L6648		\$2,560.98
	L6650		\$274.20
	L6655		\$80.32
	L6660		\$85.04
	L6665		\$39.54
	L6670		\$40.89
	L6672		\$155.24
	L6675		\$96.31
	L6676		\$118.41
R	L6677		\$233.54
	L6680		\$190.79
	L6682		\$242.72
	L6684		\$371.93
	L6686		\$533.19

L6688	Code Status			Maximum
L6688	Indicator	Code	Comments	Allowable Fee
L6689		L6687		\$462.58
L6690		L6688		\$566.45
L6691		L6689		\$693.30
L6692		L6690		\$735.26
L6693   \$2,235.13     R		L6691		\$318.08
R L6694 L6695 S478.7.  R L6696 S1,035.59 R L6697 S1,035.59 R L6698 S531.87 L6700 S473.87 L6700 S473.87 L6710 S265.56 L6710 S318.59 L6715 S315.16 L6725 S351.05 L6730 S533.77 L6735 S298.56 L6740 S335.37 L6740 S335.37 L6755 S336.24 L6756 S336.24 L6757 S336.24 L6758 S498.56 L6770 S336.24 L6759 S336.24 L6770 S336.28 S498.56 S498.57 S498.56 S498.57 S498.56 S498.57 S498.		L6692		\$448.49
R 1.6696 R 1.6697 R 1.6697 R 1.6698 S 1.035.59 R 1.6698 S 531.87 L.6700 S 4473.81 L.6705 L.6705 S 265.56 L.6710 S 318.59 L.6715 S 315.16 L.6720 S 8684.17 L.6725 S 351.05 L.6730 S 563.62 L.6735 S 598.56 L.6740 S 5298.56 L.6740 S 533.77 L.6745 S 533.63 L.6755 S 5336.31 L.6755 S 5336.31 L.6755 S 5336.31 L.6770 S 536.59 L.6770 S 536.59 L.6770 S 536.59 L.6790 S 536.79 L.6780 S 5406.28 L.6795 S 531.39 L.6795 S 531.39 L.6795 S 531.39 S 5406.28 S 540		L6693		\$2,235.13
R L6696 \$1,035.59 R L6697 \$1,035.59 R L6698 \$531.87 L6700 \$437.38 L6705 \$265.56 L6710 \$318.59 L6715 \$318.59 L6720 \$684.17 L6725 \$351.05 L6730 \$566.62 L6730 \$353.77 L6745 \$322.39 L6755 \$336.31 L6755 \$336.31 L6750 \$336.31 L6770 \$336.88 L6770 \$336.89 L6770 \$336.89 L6780 \$362.38 L6790 \$336.39 L6800 \$390.194 L6805 \$339.19 L6806 \$3339.19 L6806 \$31,131.39.43 L6807 \$391.39.41 L6809 \$297.57 L6810 \$316.39 L6825 \$397.93 L6830 \$31,132.32 L6830 \$31,252.32 L6835 \$3728.17 L6860 \$595.59 L6865 \$3595.59	R	L6694		\$574.46
R L6697 R L6698 S531.87 L6700 S473.81 L6700 S265.56 L6710 S318.59 L6715 S315.16 L6720 S684.17 L6725 S351.05 L6730 S563.62 L6730 S563.62 L6735 S298.56 L6740 S335.77 L6745 S323.99 L6750 S336.31 L6755 S336.32 L6750 S336.34 L6755 S336.34 L6776 S336.36 L6770 S336.36 L6770 S336.36 L6770 S336.36 L6790 S336.39 L6790 S336.38 L6790 S336.38 L6800 S901.94 L6806 S1,273.30 L6807 S1,139.43 L6808 S981.41 L6809 S297.57 L6800 S91.41 L6809 S297.57 L6800 S91.41 S1,139.43 S91.41 S		L6695		\$478.72
R L6697 R L6698 S531.87 L6700 S473.81 L6700 S265.56 L6710 S318.59 L6715 S315.16 L6720 S684.17 L6725 S351.05 L6730 S563.62 L6730 S563.62 L6735 S298.56 L6740 S333.77 L6745 S333.92 L6750 S336.31 L6755 S334.41 L6765 S344.41 L6770 S336.82 L6770 S336.82 L6770 S336.83 L6780 S336.91 L6780 S336.91 L6780 S336.93 S40.28	R	L6696		\$1,035.59
R L6698 \$531.87 L6700 \$473.81 L6700 \$3473.81 L6705 \$265.56 L6710 \$318.75 L6715 \$315.16 L6720 \$684.17 L6725 \$351.05 L6730 \$563.62 L6735 \$298.56 L6740 \$3333.77 L6745 \$323.99 L6750 \$3336.24 L6755 \$336.24 L6755 \$336.24 L6757 \$336.29 L6770 \$3336.88 L6770 \$3336.89 L6770 \$3336.89 L6790 \$336.38 L6790 \$336.38 L6795 \$1,141.63 L6800 \$901.94 L6806 \$1,273.30 L6807 \$1,139.43 L6808 \$981.41 L6809 \$297.57 L6810 \$16830 L6825 \$977.93 L6830 \$1,252.32 L6835 \$1,136.03 L6845 \$799.73	R	L6697		
L6705       \$265.56         L6710       \$318.59         L6715       \$315.16         L6720       \$684.17         L6725       \$351.05         L6730       \$563.62         L6735       \$298.56         L6740       \$353.77         L6745       \$323.99         L6750       \$336.31         L6755       \$336.24         L6765       \$344.41         L6770       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6840       \$749.59         L6840       \$749.59         L6840       \$759.59         L6840       \$595.59         L6865       \$265.06         L6866       \$595.59	R	L6698		
L6705       \$265.56         L6710       \$318.59         L6715       \$315.16         L6720       \$684.17         L6725       \$351.05         L6730       \$563.62         L6735       \$298.56         L6740       \$353.77         L6745       \$323.99         L6750       \$336.31         L6755       \$336.24         L6765       \$344.41         L6770       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6840       \$749.59         L6840       \$749.59         L6840       \$759.59         L6840       \$595.59         L6865       \$265.06         L6866       \$595.59		L6700		\$473.81
L6715       \$315.16         L6720       \$684.17         L6725       \$351.05         L6730       \$563.65         L6731       \$598.56         L6740       \$353.77         L6745       \$323.99         L6750       \$336.31         L6755       \$334.44         L6770       \$336.68         L6771       \$336.79         L6780       \$365.79         L6780       \$365.79         L6790       \$362.8         L6795       \$1,141.63         L6800       \$31,141.63         L6801       \$31,141.63         L6802       \$339.19         L6803       \$31,273.30         L6804       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.73         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.30         L6841       \$709.73         L6845       \$709.73         L6846       \$749.59         L6865       \$595.50         L6866       \$595.50         L6867       \$985.27				\$265.56
L6715       \$315.16         L6720       \$684.17         L6725       \$351.05         L6730       \$563.62         L6735       \$298.56         L6740       \$353.77         L6745       \$323.99         L6750       \$336.21         L6755       \$336.24         L6765       \$344.41         L6770       \$336.88         L6770       \$336.79         L6780       \$406.28         L6790       \$365.79         L6780       \$406.28         L6790       \$365.30         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6840       \$749.59         L6845       \$709.73         L6855       \$728.17         L6860       \$595.59         L6860       \$595.59         L6865       \$265.06		L6710		\$318.59
L6725       \$351.05         L6730       \$563.62         L6735       \$298.56         L6740       \$353.77         L6745       \$323.99         L6750       \$336.31         L6755       \$336.24         L6765       \$344.41         L6770       \$336.68         L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.37         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6855       \$725.19         L6860       \$595.59         L6865       \$5265.06         L6867       \$985.27		L6715		\$315.16
L6725       \$351.05         L6730       \$563.62         L6735       \$298.56         L6740       \$353.77         L6745       \$323.99         L6750       \$336.31         L6755       \$336.24         L6765       \$344.41         L6770       \$336.68         L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.37         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6855       \$725.19         L6860       \$595.59         L6865       \$5265.06         L6867       \$985.27		L6720		\$684.17
L6730       \$563.62         L6735       \$298.56         L6740       \$353.77         L6745       \$323.99         L6750       \$336.31         L6755       \$336.24         L6765       \$344.41         L6770       \$336.88         L6775       \$3365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$991.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$1,252.32         L6825       \$977.50         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$799.73         L6855       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27		L6725		
L6735       \$298.56         L6740       \$353.77         L6745       \$323.99         L6750       \$336.31         L6755       \$336.24         L6765       \$344.41         L6770       \$336.68         L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6855       \$726.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6740				\$298.56
L6745       \$323.99         L6750       \$336.31         L6755       \$336.24         L6765       \$344.41         L6770       \$336.68         L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6830       \$1,252.32         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6865       \$985.27				
L6750       \$336.31         L6755       \$336.24         L6765       \$344.41         L6770       \$336.68         L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6806       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6865       \$985.27				
L6755       \$336.24         L6765       \$344.41         L6770       \$336.68         L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6865       \$985.27				
L6765       \$344.41         L6770       \$336.68         L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6770       \$336.68         L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6775       \$365.79         L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6780       \$406.28         L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6790       \$362.38         L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6795       \$1,141.63         L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6800       \$901.94         L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6805       \$339.19         L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6806       \$1,273.30         L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				•
L6807       \$1,139.43         L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6808       \$981.41         L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6809       \$297.57         L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6810       \$160.50         L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6825       \$977.93         L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6830       \$1,252.32         L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				\$977.93
L6835       \$1,136.03         L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				\$1,252.32
L6840       \$749.59         L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6845       \$709.73         L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6850       \$626.14         L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6855       \$728.17         L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				\$626.14
L6860       \$595.59         L6865       \$265.06         L6867       \$985.27				
L6865       \$265.06         L6867       \$985.27				
L6867 \$985.27				
				\$222.10

Code Status			Maximum
Indicator	Code	Comments	Allowable Fee
	L6870		\$215.37
	L6872		\$819.25
	L6873		\$375.16
	L6875		\$751.79
	L6880		\$475.42
	L6881		\$3,218.65
	L6882		\$2,441.49
R	L6883		\$1,643.41
R	L6884		\$2,245.72
R	L6885		\$3,405.88
	L6890		\$148.92
	L6895		\$497.18
	L6900		\$1,557.21
	L6905		\$1,569.94
	L6910		\$1,288.51
	L6915		\$582.32
	L6920		\$6,240.39
	L6925		\$6,824.77
	L6930		\$6,770.76
	L6935		\$7,155.73
	L6940		\$8,106.51
	L6945		\$8,981.97
	L6950		\$8,467.00
	L6955		\$9,578.33
	L6960		\$10,431.89
	L6965		\$11,780.55
	L6970		\$11,696.65
	L6975		\$12,815.82
	L7010		\$2,957.89
	L7015		\$4,868.05
	L7020		\$2,892.44
	L7025		\$2,792.64
	L7030		\$4,836.56
	L7035		\$3,033.24
	L7040		\$2,415.57
	L7045		\$1,296.25
	L7170		\$4,896.90
	L7180		\$29,382.25
	L7181		BR
	L7185		\$5,143.59
	L7186		\$7,093.85
	L7190		\$6,389.90
	L7191		\$7,412.66
	L7260		\$1,820.28
	L7261		\$3,815.05
	L7266		\$794.01
	L7272		\$1,912.07
	L7274		\$5,704.86
	2,211	l .	Ψ3,704.00

Code			
Status	~ -	~	Maximum
Indicator	Code	Comments	Allowable Fee
	L7360		\$212.85
	L7362		\$220.62
	L7364		\$417.90
	L7366		\$540.16
	L7367		\$306.51
D	L7368		\$397.34
R	L7400		\$241.29
R	L7401		\$270.12
R	L7402		\$291.72
R	L7403		\$289.93
R	L7404		\$437.58
R	L7405		\$572.30
	L7499		BR
	L7500		#
	L7510		BR
	L7520		\$24.54
	L7600		BR
	L7900		#
	L8000		\$33.13
	L8001		\$98.74
	L8002		\$129.88
	L8010		\$57.97
	L8015		\$49.01
	L8020		\$193.22
	L8030		\$253.01
	L8035		#
	L8039		BR
	L8040		#
	L8041		#
	L8042		#
	L8043		#
	L8044		#
	L8045		#
	L8046		#
	L8047		#
	L8048		#
	L8049		# \$94.05
	L8300		\$84.05
	L8310		\$117.72
	L8320		\$44.82
	L8330		\$39.59
	L8400		\$14.88
	L8410		\$21.20
	L8415		\$21.77
	L8417		\$59.20
	L8420		\$16.10
	L8430		\$18.38
	L8435		\$22.48

Code			
Status			Maximum
Indicator	Code	Comments	Allowable Fee
	L8440		\$33.54
	L8460		\$69.99
	L8465		\$39.12
	L8470		\$5.35
	L8480		\$9.84
	L8485		\$11.53
	L8499		BR
	L8500		#
	L8501		#
	L8505		#
	L8507		#
	L8509		#
	L8510		#
	L8511		#
	L8512		#
	L8513		#
	L8514		#
	L8515		#
	L8600		# # # # #
	L8603		#
	L8606		#
	L8609		#
	L8610		#
	L8612		
	L8613		#
	L8614		#
	L8615		#
	L8616		#
	L8617		#
	L8618		# # # # #
	L8619		#
	L8621		#
	L8622		#
	L8623		
	L8624		#
1	L8630		#
	L8631		#
1	L8641		# # # # # #
	L8642		#
	L8658		#
	L8659		#
	L8670		#
	L8680		π #
	L8681		#
	L8682		#
	L8683		#
	L8684		# # # #
	L8685		#
	L0003		#

Link To Legend For Code Status Indicator

Code			
Status			Maximum
Indicator	Code	Comments	Allowable Fee
	L8686		#
	L8687		#
	L8688		#
	L8689		#
	L8699		#
	L9900		#
	V2623		\$862.80
	V2624		\$65.09
	V2625		\$395.77
	V2626		\$213.33
	V2627		\$1,377.82
	V2628		\$325.33
	V2629		BR

**Code Status Indicators** 

Legend

D = Discontinued Code

BR = By Report # = Not Covered

N = New Code P = Policy Change

 $R = Rate\ Update$ 

Link To Legend For Code Status Indicator

Maximum

Allowable Fee

Code
Status
Indicator Code Comments